Participant Age _____



Participant Name

<u>Participation, Liability Release Form and Assumption of Risk</u> To be filled in using BLOCK letters

Contact	
fully acknowledge that participation in dance classes and activities could result in personal injury, and that despite all precautions being taken by ŻfinMalta – National Dance Company, accidents and injuries may occur. By signing this release form, I (the parent/guardian) assume all risks related to the use of any and all spaces used by ŻfinMalta – National Dance Company.	
I agree to release from responsibility ŻfinMalta – National Dance Compstaff members, and facilities used by the entity from any course of action future. I will not hold ŻfinMalta – National Dance Company liable for an bruises, cuts, sprains, fractures, broken bones, concussions or death or a which may occur on the premises before, during or after classes.	n, claims, or demands now and in the ny personal injury including: scrapes,
Furthermore, I agree to comply with the ŻfinMalta's <u>Class Policy</u> (<u>https:participation/class-policy/</u>), and take full responsibility for my behavior the facilities utilised by ŻfinMalta – National Dance Company	
In the event that I/we should observe any unsafe conduct or conditions I/we agree to report the unsafe conduct or conditions to Anna Nowak, Ż soon as possible.	
PHOTOGRAPHY/ VIDEO CONSENT – I give permission for my ph publicity and advertising, on social media, ZfinMalta's website, and in the	
Parent/Guardian Name	
Parent/Guardian Signature	Date
Email address	
I would like to receive ŻfinMalta's newsletter at the above er	mail address $\ \square$