



Required Academy Liability/Waiver Release

Student Name (s): _____
Please Print

Please Print

Please Print

Parent or Guardian Contact: _____
Please Print

Please read carefully. This is a release of liability and waiver of certain legal rights.

As the enrolled participant and/or the parent/guardian of the enrolled participant, I agree and understand that dance/fitness training is a potentially hazardous activity. I recognize that there are risks inherent in dance training including but not limited to serious physical injury. The participant hereby agrees to participate in activities of the Ballet Austin Academy and hereby agrees to indemnify and hold harmless Ballet Austin, its instructors, officers, directors, agents and employees against any liability resulting from any injury that may occur to the participant while participating in activities of the Ballet Austin Academy. The participant also agrees to indemnify Ballet Austin for any damages incurred arising from any claims, demand, action or course of action by the participant.

The enrolled participant authorizes any representative of Ballet Austin to have the participant treated in any medical emergency during their participation in activities of the Ballet Austin Academy. Further, the participant and/or parent/guardian agrees to pay all costs associated with medical care and transportation for the participant.

Photograph/Likeness/Videotape Release

As the enrolled participant and/or the parent/guardian of the enrolled participant, I authorize Ballet Austin, Inc. and/or its representative, agent, or employee to photograph and/or videotape and use any photograph/likeness of me or my minor child for any purpose, including publicity, choreographic archives, promotional materials and/or any other reason deemed appropriate by the School's Directors.

Parent or Guardian Signature: _____ Date: _____

Drop off or mail: Ballet Austin, 501 West 3rd Street, Austin, TX 78701

Email: tonie.torres@balletaustin.org