



## Bring-A-Friend Day Waiver

This form **MUST** be signed by parent/guardian of visiting student to allow participation.

### LIABILITY RELEASE:

By signing this form, I understand and acknowledge that instruction, classes, practice, performance, community events, and all other activities related to arts education are inherently potentially dangerous activities. As such, I permanently release Inspiration Performing Arts Center on behalf of myself, my children, relatives, heirs, etc. from any negligence on behalf of Inspiration Performing Arts Center, its employees, guest teachers, agents, etc. and all liability arising from injuries and damages including but not limited to muscle strain, fatigue, serious bodily harm, and/or death which I or my child incurs while engaging in such activities.

In case of a medical emergency, I hereby authorize the staff of Inspiration Performing Arts Center to obtain the proper medical assistance (as deemed by calling 911) at my expense for my child or me. If signing for a minor child, you are releasing liability on behalf of that child and asserting that you are the child's parent, relative, guardian, or authorized agent.

### POLICY ACKNOWLEDGEMENT

By signing this form, I acknowledge that I have read, understand and agree to Inspiration Performing Arts Center's policies regarding the liability release.

Student's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Parent's Name (Printed): \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

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