



COVID-19 AND LIABILITY WAIVER FORM

- I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing.
- I understand and will wear a mask until it is ok per CDC guidelines
- I further acknowledge that X Static Dance Studio LLC has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19.
- I will comply and understand the reason for their non-touch forehead temperature check before entering the studio
- I understand only students of the class/classes are allowed in the studio along with the Director and staff members
- I voluntarily seek services provided by X Static Dance Studio LLC and acknowledge that I am increasing my risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending my appointment.

I attest that:

- I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- I have not traveled internationally within the last 14 days.
- I have not traveled to a highly impacted area within the United States of America in the last 14 days.
- I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.
- I have not been diagnosed with Coronavirus/Covid-19 and not yet cleared as non-contagious by state or local public health authorities.
- I am following all CDC recommended guidelines as much as possible and limiting my exposure to the Coronavirus/COVID-19.

I release X STATIC DANCE STUDIO LLC , it's instructors, independent contractors, and all other associates from liability for harm, theft, or injury that may be suffered by me and/or members of my family traveling to or from or during participation in activities and programs sponsored by X STATIC DANCE STUDIO LLC . I hereby acknowledge that I am voluntarily assuming full responsibility for all risks of physical injury arising out of active participation in a dance class or other dance related activities. I acknowledge the contagious nature of COVID-19 and other contagious diseases and viruses and voluntarily assume the risk that I and/or my children may be exposed to or infected by COVID-19 by attending and participating and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 and other contagious diseases and viruses may result from the actions, omissions, or negligence of myself and others, including, but not limited to, employees, independent contractors, volunteers, and program participants and their families. I release X STATIC DANCE STUDIO LLC, its instructors, independent contractors, and all associates from liability for harm, injury or death pertaining to COVID-19 and other contagious diseases and viruses. I understand that there are NO refunds for registration fees, costume, recital fees or classes. I understand and agree to X STATIC DANCE STUDIO LLC policies and procedures. I understand that my student must have this release form signed before attending class. I give permission to X STATIC DANCE STUDIO LLC to use pictures and or video of my child for advertising purposes in print, promotional videos and on the website. Entire Semester Tuition is to be paid 1 HOUR BEFORE CLASS STARTS. I understand and have read all the studio and policy information.

STUDENT FULL NAME (LAST, FIRST, MIDDLE INITIALS) _____ DATE: _____

STUDENT SIGNATURE (MUST BE 18 YEARS AND OLDER) _____ DATE _____

For students under the age of 18

PARENT/LEGAL GUARDIAN FULL NAME _____ DATE: _____

PARENT/LEGAL GUARDIAN SIGNATURE _____ DATE: _____

YOU CANNOT TAKE CLASS WITHOUT THIS FORM BEING SIGNED AND EMAILED OR GIVEN PERSONALLY TO THE DIRECTOR