

Columbia Dance Academy
Jeanne Szkolka
Owner/Director

Assumption of Risk and Liability

_____ has my permission to take part in dance,
(Student name)

tumbling and/or Acrobatic Gymnastics classes given by Jeanne Szkolka, or any teacher or assistant of Jeanne Szkolka's. I am fully aware that injury can occur in an activity that creates unusual height and motion. Knowing this, I assume all responsibility for any injury, however great, which may occur to me or my child during practices, classes, exhibitions or competitions. I also release the Columbia Dance Academy, Jeanne Szkolka, assistants and assigns from any loss, including legal fees and awards for damages from any legal action on behalf of myself or child as a result of any injury or loss, however great, during the travel to or from any of the above events. With this I also certify that any medical expenses, should an injury occur, is covered by my insurance policy, which shall be in effect during the entire time my child is enrolled in the above activities given and/or supervised by Jeanne Szkolka, her assistants or assigns.

Parent/Legal Guardian

Date