

Miss Kim's Dance Class 2021/22

COVID-19 Assumption of Risk and Waiver of Liability Form-
Plus!! More reminders of coming back to "NORMAL"!!

___INITIALS I agree to monitor the current health of my Dancer and not bring them to the Studio if they present any of the following symptoms of COVID-19: *Fever, Shortness of Breath, Sudden Loss of Taste or Smell, Dry Cough, Runny Nose, Sore Throat.*

___INITIALS I agree to respect the observations and recommendations of Miss Kim and/or the Teachers and agree to respond promptly if I am contacted to pick up my Dancer early from class if they present with the above symptoms, or other weird ones.

___INITIALS I agree to provide my Dancer with a full water bottle when they arrive for class. Please bring a water bottle to class. Please hand sand before you touch the water cooler. Littles can get cups from teachers.

___INITIALS By signing this document, I agree that if my Dancer is exposed to or infected by COVID-19 during their participation in this activity, that I have waived my right to create a lawsuit against Dance Class LLC. I understand that the risk of becoming exposed to or infected by COVID-19 at Dance Class may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Teachers, Dancers, and family members/friends of either.

___INITIALS I consent for my Dancer to practice clean hygiene while at Dance Class and understand that they may be asked frequently to wash hands and/or use hand sanitizer at the discretion of the Teacher(s).

___INITIALS- - "NORMAL"-I will not send my child to Dance Class with (even maybe...!) and notify Kim of any signs of : **Lice- Stomach Flu- Pink Eye- Poison Ivy- or any other normal pain in the Butt.**

Parent Signature _____

Print Name _____

Names of Dancer(s) _____

Date _____

Comments: