A P DANCE DIMENSIONS LIABILITY WAIVER

Provider: Abbey Prihoda Mahoney, DBA A P Dance Dimensions

Student Name:	
Client Parent/Legal Guardian(s) Names:	
Relationship to Student:	
Waiver of Liability, Indemnity Wavier: In consideration of permission to use, and services of A P Dance Dimensions and prover presentatives, or assigns, do hereby release, who Dimensions, its principles, its directors, officers agents from liability from any and all claims arithe aforementioned parties. This agreement approached the participation of illnesses arising from the participation.	waive, discharge, and covenant to not sue, A P Dance s, employees, volunteers, independent contractors, an ising from the ordinary negligence of provider or any pplies to 1) personal injury (including death) from ation in Dance/Gymnastics/Cheerleading/Fitness
facilities, premises, or equipment: and to 2) any	d activities, classes, observation, and individual use of y and all claims resulting from damage to, loss of, thef
Mahoney, A P Dance Dimensions, Contest Team from all claims resulting from negligence and to Prihoda Mahoney, A P Dance Dimensions, Conte and Staff in investigating and defending a claim court or arbitration determines that Abbey Prih Directors and Teachers, Coaches, Volunteers and Severability and Venue: The undersigned fur	ther expressly agrees that the foregoing waiver and be as broad and inclusive as is permitted by the law of
	d effect. Likewise, I agree that if legal action is brough
Acknowledgement of Understanding: I have agreement and fully understand its terms. I unsubstantial rights, including my right to sue. I a voluntarily, and intend my signature to be compressed extent allowed by the law of the State of Attendance/Tuition Policy: Being a part of A you do not show up for an extended amount of	e read this waiver of liability and indemnification derstand that I am knowingly and voluntarily giving unacknowledge that I am signing the agreement freely an plete and unconditional release of all liability to the of Texas. P Dance Dimensions is a year round commitment. If time, you will be removed from the class if unable to month upon signing up, regardless of attendance. If you
Signature of Parent/Legal Guardian	Date
Printed Name	

A P DANCE DIMENSIONS **GYMNASTICS** SAFETY, AND LIABILITY WAIVER Provider: Abbey Prihoda Mahoney, DBA A P Dance Dimensions Student Name: Client Parent/Legal Guardian(s) Names: Relationship to Student: Waiver of Liability, Indemnity Agreement, and Assumption of Risk Wavier: In consideration of permission to use, today and on all future dates the property, APDD Gymnastics facilities and equipment, and services of A P Dance Dimensions and provider I, on behalf of myself, my heirs, personal representatives, or assigns, do hereby release, waive, discharge, and covenant to not sue, A P Dance Dimensions, its principles, its directors, officers, employees, volunteers, independent contractors, and agents from liability from any and all claims arising from the ordinary negligence of provider or any of the aforementioned parties. This agreement applies to 1) personal injury (including death) from accidents or illnesses arising from the participation in gymnastics, tumbling, strength training, stretching activities including but not limited to, organized activities, classes, observation, and individual use of facilities, premises, or equipment: and to 2) any and all claims resulting from damage to, loss of, theft of property. Indemnification and Hold Harmless: I agree to HOLD HARMLESS AND INDEMNIFY Abbey Prihoda Mahoney, A P Dance Dimensions, Contest Team Directors and Teachers, Gymnastics Coaches, Volunteers and Staff from all claims resulting from negligence and to reimburse them for any expenses incurred by Abbey Prihoda Mahoney, A P Dance Dimensions, Contest Team Directors and Teachers, Gymnastics Coaches, Volunteers and Staff in investigating and defending a claim or suit if my claim is withdrawn, or to the extent a court or arbitration determines that Abbey Prihoda Mahoney, A P Dance Dimensions, Contest Team Directors and Teachers, Gymnastics Coaches, Volunteers and Staff is not responsible for the injury or loss. Severability and Venue: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of Texas and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. Likewise, I agree that if legal action is brought, it must be in Grimes County, Texas. Acknowledgement of Understanding: I have read this waiver of liability and indemnification agreement and fully understand its terms. I understand that I am knowingly and voluntarily giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend my signature to be complete and unconditional release of all liability to the greatest extent allowed by the law of the State of Texas. Attendance/Tuition Policy: Being a part of APDD Gymnastics is a twice a week commitment. Attendance is very important so that students do not fall behind, and are able to succeed at the correct rate. Tuition is due every month upon signing up, regardless of attendance. If you choose to miss, your tuition will still be due. After a child has quit for the year, we will not accept their registration for classes until the next school year! I, ______, the parent/legal guardian of _____, have read and agree to all of the policies, terms and conditions published by A P Dance Dimensions, including but not limited to semester fees, due dates, refund policies, rules, and Director decisions.

Signature of Parent/Legal Guardian

Date

Printed Name