

**SUMMER DROP-IN Waiver 2018**

(If under 18 must be signed by a parent or guardian)  
Only one waiver needed for the entire summer



Participants Name: \_\_\_\_\_

I acknowledge and understand that participation is at my own risk. I voluntarily release the Kids Can Dance staff of any liability in the event of an accident or illness. I release Kids Can Dance to take appropriate action should I require emergency medical treatment.

I grant Kids Can Dance the right to take photographs/videos and recognize that these may be used for future promotional material.

\_\_\_\_\_  
(Parent/Guardian Name - print)

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Phone number)

\_\_\_\_\_  
(Email Address)