

BreakOut Studios

Registration and Liability Form

Name: _____ Date of Registration: _____

Address: _____ Zip Code: _____

Phone #: _____ Date of Birth: _____

Email: _____

your email will be entered into our info and newsletter system

How did you hear about us? _____

Emergency Contact: _____

Phone Number: _____

Relation: _____

Liability Waiver. I _____, understand that my participation in the 2021-2022 season (BreakOut Studios) may result in injury or illness. I acknowledge that certain types of injuries and illness are common among dance related classes/events and that I am assuming the risk of such injury or illness by participating in the 2021-2022 season (BreakOut Studios). In the event of injury, I authorize BreakOut Studios Inc. to obtain necessary medical treatment on my behalf. I understand that a BreakOut Studios LLC., the host venue, Todd Wilson, Craig Wilson, employees, teachers, assistants, staff, crew or other guests are not liable for personal illness, injury, damage or loss to personal property. I understand that I will be responsible for any and all medical and related bills that may be incurred for any illness or injury that I may sustain in classes or events. I also understand I may be declined to participate in any class or activity.

Appearance Agreement. I understand that as a participant in and or a spectator of the 2021-2022 season (BreakOut Studios). I may be included in livestreams, videotapes or photographs taken during the classes/event. I agree to be photographed and or videotaped and that my name, face, likeness, voice and appearance may be used in advertising and promoting events for BreakOut Studios.

*By signing this document, I have read and understand the policies, rules and regulations for the 2021-2022 season (BreakOut Studios).

Student Name (Print): _____

Student Name (Signature): _____ Date: _____

If under 18....

Parent Name (Print): _____

Parent Name (Signature): _____ Date: _____

BreakOut Admin: MB ___ WIX ___