

Agreement of Release and Waiver of Liability

I / We, _____ hereby agree to the following:

1) That (I am / We are) participating in a dance / fitness class with **SalsaDanceZone** (Alberto Gonzalez & Teresa Szeffler). I recognize that dance/fitness type classes require physical exertion which may be strenuous and may cause physical injury. I am also fully aware of the risk and hazard involved.

2) **I / We** understand that it is my responsibility to consult a physician prior to and regarding my participation in the class. I represent that I am physically fit and have no medical condition which would prevent my full participation.

3) **I / We** agree to take full responsibility for any risks, injuries or damages known or unknown which might occur as a result of participating in the class(es).

4) **I / We** knowingly and voluntarily waive any claim I may have against **Salsa Dance Zone** (Alberto Gonzalez & Teresa Szeffler), owners and lessors of premises with respect to any and all injury, disability, death, or loss or damage to person or property that I sustain as a result of participating in class(es).

I / We have read the above release and waiver of liability and fully understand its content. I voluntarily agree to the terms and conditions stated above.

Photo consent / release:

I / We understand and accept that any photos, videos, recordings, taken by/on behalf of **Salsa Dance Zone** during events such as dance lessons, practice sessions or dance parties may be used for promotional, educational, commercial or instructional purposes and give permission to allow the use of such material.

I have read the above release and waiver of liability and fully understand its content. I voluntarily agree to the terms and conditions stated above.

Full Name (If couple both names): _____

Date

Signature of Participant (s)

Fill out the below information in the event that we need to contact you.

PLEASE WRITE CLEARLY.

Cell #: _____

Phone #: _____

E-mail: _____