

CUSTOMER INFORMED CONSENT AND RELEASE – COVID-19

A signed waiver must be submitted before dancers may begin classes.

THE ACADEMY OF DANCE ARTS

I understand and acknowledge the dangerous and contagious nature of the SARS-CoV-2 virus ("Coronavirus") that can cause the disease known as COVID-19. I have had sufficient opportunity to access and review available information regarding the Coronavirus and COVID-19, including information available from federal, state and local authorities. I acknowledge that, while The Academy of Dance Arts ("ADA") has put in place measures to prevent the existence and spread of the Coronavirus within its facility, ADA cannot guarantee that myself or child will not become infected with the Coronavirus while present at ADA. I further understand that my exposure to the Coronavirus may result from the actions, omissions, or negligence of myself and/or others, including, but not limited to, other ADA customers or even ADA personnel.

Understanding these facts, I voluntarily choose to allow my child/self to attend classes/recital at ADA and acknowledge that I am increasing my risk of exposure to the Coronavirus by engaging in such activities.

I, ON BEHALF OF MYSELF, MY SUCCESSIONS, AND MY ASSIGNEE(S), HEREBY RELEASE AND DISCHARGE ADA, AND THEIR EMPLOYEES, REPRESENTATIVES, OWNERS AND AGENTS FROM ANY AND ALL CLAIMS, CAUSES OF ACTION, LEGAL PROCEEDINGS, DAMAGES, LOSSES, OR HARM OF ANY KIND, AT LAW OR IN EQUITY, ARISING FROM MY POTENTIAL EXPOSURE TO THE CORONAVIRUS AND THE ONSET OF COVID-19 BY REASON OF MY VOLUNTARY DECISION TO ENTER AND SPEND ANY AMOUNT OF TIME IN THE ADA LOCATION.

I Accept

I have received or will obtain a copy of Academy of Dance Arts policies and will take the responsibility to carefully read and follow the rules and policies therein. I understand that Academy of Dance Arts does not give credit and/or refunds for class(es) missed due to holiday, vacation, illness, weather, etc. I further understand that there are specific risks of physical or property damages, losses, or injury that may result from my or my child's participation with Academy of Dance Arts, and I voluntarily assume the risks associated with such participation.

I Accept

In consideration of the benefits of instructions provided by the Academy of Dance Arts for my child, I, intending to be legally bound, do hereby enroll my child named above, in the program and do hereby waive claim and release the Academy of Dance Arts, Directors, Faculty, and/or any other instructors, and/or other personnel for claim or liability for any injury, or accident occurring or arising from the instructional program or incidental sponsored activities either on or off these premises (7 Prestige Cir. #100, Allen, TX 75002). The undersigned authorizes Academy of Dance Arts to use their child's image in part or whole in publications and on the website, www.danceada.com.

I Accept

Electronic Signature Agreement. By selecting the "I Accept" checkbox, I am signing this agreement electronically. I agree this electronic signature is the legal equivalent of my manual signature on this agreement.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

I Accept