



## Pratna Kuchipudi Vrttialaya

- follow the tradition.

### LIABILITY RELEASE/WAIVER FORM

To join any classes at Pratna Kuchipudi Vrttialaya, all participants and students must complete and submit this form. In the case of students under the age of 18, a parent or guardian must also sign this form.

Please note that admission to class or rehearsal will not be allowed if this form is not received before the class and is not properly signed. It's important to ensure that this requirement is fulfilled to participate in the activities at Pratna Kuchipudi Vrttialaya.

#### Waiver of Liability

I acknowledge and comprehend the inherent risks of physical injury associated with dance and dance training, and I willingly accept those risks. Consequently, I release Pratna Kuchipudi Vrttialaya, event sponsors, employees, and dance teachers from any liability for injuries sustained or illnesses contracted during my attendance or participation in any dance classes, rehearsals, workshops, or performances.

I further agree to indemnify, defend, and absolve Pratna Kuchipudi Vrttialaya, its employees, and dance teachers from any liabilities, costs, and judgments resulting from acts or omissions on my or my child's part that led to injury or damage to any person or property.

#### Protection of Property

I acknowledge and consent to my sole responsibility for the protection of my personal belongings during my attendance or participation in any classes, rehearsals, workshops, or performances. By this release, I absolve Pratna Kuchipudi Vrttialaya, its affiliated dance studios, rental properties, event sponsors, employees, and dance teachers from any liability in the event of loss or damage to my personal property during my attendance or participation in the mentioned activities.

Furthermore, I commit to adhering to all rules, regulations, and policies established by Pratna Kuchipudi Vrttialaya

#### Medical Attention

In the event of a physical injury or a medical emergency, I hereby grant Pratna Kuchipudi Vrttialaya the authority to take the required measures to transport either myself or my child to a

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medical treatment facility as deemed necessary. I acknowledge that all expenses associated with such transportation and medical treatment will be my sole responsibility.

In situations of extreme emergencies or if my child is under 18 years of age, I understand that **Pratna Kuchipudi Vasthalaaya** will make an effort to inform the individual(s) I have designated as my emergency contact(s) regarding my condition and provide instructions on how to reach me.

### **Photo Release**

**Pratna Kuchipudi Vasthalaaya** retains the right to utilize photographs and videos captured during classes, workshops, performances, or related events for instructional, advertising, and promotional purposes involving **Pratna Kuchipudi Vasthalaaya** and its programs. Students or parents of minor students who object to this policy must notify **Pratna Kuchipudi Vasthalaaya** before participating in the class.

### **Acknowledgement of Waiver**

By signing this Release, I acknowledge and affirm that I have fully acquainted myself with the contents of the waiver and hold harmless agreement by reading it before affixing my signature. I understand that I am voluntarily signing this document without any external oral representations, statements, or inducements beyond what is included in this written statement. Furthermore, I confirm that there are no health-related reasons or issues that would impede or restrict my or my child's participation in this activity. I acknowledge my commitment to cover any medical expenses that may arise as a consequence of injury to me or my child

### **Electronic Signature**

The electronic signature and related fields serve as a legally binding representation of my consent, similar to a handwritten signature on a paper form. I confirm that I have thoroughly reviewed and comprehended **Pratna Kuchipudi Vasthalaaya's** Liability and Waiver outlined above. I acknowledge that my child or adult student is participating in classes at their own risk and agree to absolve **Pratna Kuchipudi Vasthalaaya**, its instructors, and assignees of any liability in case of physical injury to the student. I also certify the accuracy of the provided information. It is my responsibility to promptly inform **Pratna Kuchipudi Vasthalaaya** of any changes to the information on this form. I affirm that I am at least eighteen (18) years of age and possess the legal capacity to sign this agreement. I execute this release with the intent to be fully and legally bound by its terms in exchange for adequate consideration.

Student/Parents' signature –

Date –