



VITACCA ADULT/TEEN DROP IN REGISTRATION FORM

PARTICIPANT INFORMATION: DATE:

First Name:	Last Name:
DOB:	

CONTACT INFORMATION:

E-mail:	Phone:
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RELEASE WAIVER

Participation Release Agreement

_____ In consideration for receiving permission to participate in this class, performance, rehearsal, or any and all activities related thereto, including but not limited to travel between sites or locations ("Activities"), I hereby release, indemnify, and covenant not to sue Kelly Ann Vitacca, Vitacca Vocational School for Dance, Houston., and any associates or employees thereof ("Releasees"), for any and all claims, costs and causes of action for property damage or personal injury, sustained by me while participating in Activities, whether arising from statute, code, ordinance, tort, common law or other source.

_____ I acknowledge that Activities I will perform may be physically strenuous. I know of no physical or mental condition, which would preclude or inhibit my full participation in Activities. I am fully aware of the risks and hazards involved with Activities, including but not limited to slips, trips, falls, breaks, heat stroke, heart attack, exhaustion, dehydration, and other related injuries. I choose to voluntarily participate in Activities with full knowledge that they may be hazardous to my property and me.

_____ I understand that Releasees do not maintain any insurance policy covering any circumstance arising from my participation in Activities or any event related to that participation. I am aware and understand that I should obtain and review my personal insurance coverage.

In signing this release, I acknowledge that I have read and understood the Release, that I am at least eighteen (18) years of age or my guardian is at least eighteen (18) years of age and fully competent.

Health Release

_____ Covid-19 Release Statement #1- Vitacca Vocational School for Dance (Vitacca Dance) has put in place heightened cleaning measures to reduce the spread of Covid-19. However, Covid-19 has been proven to be highly contagious and asymptomatic in some persons. Therefore, Vitacca Dance cannot guarantee that you or your child(ren) will not become infected with Covid-19. Further, attending Vitacca Dance could increase your risk and your child(ren)'s risk of contracting Covid-19. By initialing you acknowledge the contagious nature of Covid-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by Covid-19 by attending Vitacca Vocational School for Dance, Woodlands, and Houston locations and that such exposure or infection may result in personal injury, illness, permanent disability, and death.

_____ I understand as of June 20, 2021, masks will be optional at Vitacca Vocational School for Dance Houston and Woodlands.

PHOTO RELEASE

In consideration of good and valuable considerations, the receipt of which is hereby acknowledged, I hereby grant to Vitacca Vocational School for Dance, Houston, its nominees, designees, successors and assigns, or those for whom they are acting, the absolute right and permission to copyright, and/or use, and/or publish photographs/videos of me, or in which I may be included in whole or in part, or composite, or distorted in character or form, in conjunction with my own or any other picture/video or reproductions thereof made at its studios or elsewhere, for art, advertising, business or trade, news reporting, social media, website, or any other lawful purpose whatsoever. I hereby waive any right that I may have to inspect and approve the finished product or the advertising copy that may be used in connection therewith or the use to which it may be applied.

Printed Name of Participant, Parent or Guardian _____

Signature _____ Date _____

**Guardian signature needed only if minor (under age 18) is involved.*