



Embrace Arts Foundation

info@embracearts.org

embracearts.org

Release, Waiver and Assumption of Risk Agreement

This form is the agreement between you and Embrace Arts Foundation that is required when you participate in Embrace Arts Foundation programs and activities as a participant, volunteer, or team member (referred to as “Participant”). It contains important terms to ensure the safety and well-being of all, and to protect Embrace Arts Foundation. This agreement is between Embrace Arts Foundation, the below named Participant and, if the Participant is under 19 or otherwise not legally capable of entering into this agreement, the below named Participant’s Guardians.

Terms And Conditions:

I understand that the activities of Embrace Arts Foundation (including by not limited to dance, music, theatre, fitness programs, etc.) involve a degree of health and safety risk, and that Embrace Arts Foundation cannot reasonably remove all these risks. By signing this form, I agree to accept all risks associated with being present at or participating in Embrace Arts Foundation activities.

By signing this Participation Waiver, either for myself or as the legal guardian on behalf of a participant, I agree that I release Embrace Arts Foundation from all legal liability associated with attending or participating in all Embrace Arts Foundation activities to the maximum extent allowed by law.

I confirm that I understand and accept full responsibility for the risks and dangers that are inherent in participating with Embrace Arts Foundation activities. These include, but are not limited to, the potential of the following: Bodily injury or illness (including contracting a communicable disease), property damage, and property loss.



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SIGNATURE

This is a legal document and by signing it you accept full responsibility for the aforementioned risks associated with participating with Embrace Arts Foundation. If you are signing as a guardian for someone else, you accept full responsibility for the aforementioned risks associated with the participant engaging in activities with Embrace Arts Foundation. Please check the appropriate box and sign below.

[] I am a **participant**. I confirm that I understand and agree to the terms and conditions in this Participation Waiver.

Name: _____

Date: _____

Signature: _____

[] I am a **parent or guardian** providing consent on behalf of the participant or volunteer named on this participation waiver. I confirm that I have legal authority to sign this document on behalf of the person listed on this form. I confirm that I understand and agree to the terms and conditions in this Participation Waiver.

Name: _____

Date: _____

Signature: _____