



## After School Life

P.O. Box 757  
Los Gatos, CA 95031  
Phone: (408) 887-9982  
Fax: (408) 871-0961

### Liability Waiver Form

I/we realize that participation in dance/exercise classes and any other activities or classes could involve some possible personal injury. Despite precautions, accidents and injuries may occur. By signing this release form, I/we (the participant and/or the parent/guardian) assume all risks related to the use of any and all spaces used by After School Life Organization.

I/we agree to release and hold harmless After School Life organization, its teachers, dancers, staff members, and facilities used from any cause of action, claims, or demands now and in the future. I/we will not hold After School Life liable for any personal injury or any personal property damage, which may occur on the premises before, during or after classes. Furthermore, I/we agree to obey the class and facility rules and take full responsibility for my/our behavior in addition to any damage I/we may cause to the facilities utilized by After School Life. I/we also understand and agree that it is our responsibility to provide adult supervision immediately after the class.

I understand that After School Life is licensed and insured organization. In the event that I/we should observe any unsafe conduct or conditions before, during or after my/our classes, I/we agree to report the unsafe conduct or conditions to the Executive Director, Program Director, instructor or staff member as soon as possible.

Participant's Name: \_\_\_\_\_

Age: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_