



Informed Consent Form

***I hereby give permission for _____

to participate in dance, tumbling and/or baton lessons at DANCEXTREME during the 2009-2010 season. Further, I authorize DANCEXTREME and its staff to provide emergency treatment of an injury to or illness of my child if qualified medical personnel consider treatment necessary and perform the treatment. This authorization is granted only if I cannot be reached and a reasonable effort has been made to do so.

Date _____ Parent or guardian _____

Family Physician _____ Phone _____

Other(s) to also contact in case of emergency _____

Relationship to student _____ Phone _____

***My child and I are aware that participating in dance, tumbling and/or baton at DANCEXTREME is a potentially hazardous activity. I assume all risks associated with participation in these art forms, including but not limited to, falls, contact with other participants, horse play, and other reasonable risk associated with these art forms. All such risks to my child are known and understood by me.

I understand this informed consent form and agree to its conditions on behalf of my child.

Parent/Guardians signature _____ Date _____

***I, hereby grant DANCEXTREME and its administration, the use of my child's image in any and all photography taken at DANCEXTREME or venues participated in for DANCEXTREME, on its website, advertising, and/or any general use.

Parent/Guardians signature _____ Date _____