

PROGRESSIVE DANCE STUDIO
WAIVER OF LIABILITY FOR COVID-19 / CORONAVIRUS

On behalf of myself, _____ [NAME] and
My child/children (list) _____ [NAME],

I acknowledge the contagious nature of the Corona Virus / COVID-19 and that the CDC and other New Jersey health officials require social distancing.

I further acknowledge that Progressive Dance Studio, Inc., its staff and its owner, Jolene Perry ("Collectively "PDS"), have put in place preventative and sanitation measures to reduce the spread of the Corona Virus/COVID-19 ("COVID-19").

Despite those procedures, I further acknowledge that PDS cannot guarantee that I or my child will not be infected by COVID-19 and that I risk being exposed and / or infected by COVID- 19 or becoming ill by the actions, omissions, negligence of myself or others, including but not limited to PDS, the other patrons of PDS or any other person who may be or have been in the studio.

I voluntarily seek the services of PDS and acknowledge that I am increasing my risk to exposure to COVID 19 by taking classes with multiple persons indoors. I acknowledge that I and my child must comply with all of the PDS policies and procedures, stated herein and online, which are set in place to reduce the spread while attending classes or awaiting my child at PDS. These include but are not limited to wearing a mask at all times, following hand washing and sanitization procedures, and maintaining social distancing as directed.

I attest that neither I nor my child: (1) are experiencing any symptoms associated with COVID19, such as coughing, shortness of breath, difficulty breathing, fever, chills, repeated shaking, muscle pain, headache, sore throat, new or loss of taste or smell; (2) have traveled internationally in the last 14 days; (3) have traveled to an area in the US that is heavily impacted by COVID-19; (4) have violated the terms of quarantine set forth by the State of New Jersey regarding travel to other states; (5) have been exposed to a person suspected of having, confirmed with or diagnosed with COVID -19; (6) we are following all CDC guidelines to limit our exposure to COVID-19.

I hereby, on behalf of myself and my child, release and hold PDS, its staff and agents harmless from, and waive on behalf of myself, my child, our heirs and assigns, and any personal representatives from any and all causes of action, claims, demands, damages, costs, expenses and compensation of any nature for damage or loss to myself or my child and/or any property that may be caused by any act, failure to act by PDS, its staff or owner, or that may arise in any way from the services rendered to me and my child. I understand that this release waives any claims for any and all claims for medical costs, bodily injury, illness, death, medical treatment or property damage. This waiver of all forms of liability extends to PDS, its owner, employees, staff, agents or assigns of any nature.

I agree that if I take any steps to claim anything against PDS, its owner, staff or employees, or agents, I shall be obligated to pay for their attorney's fees and costs of suit.

DATED: _____[signature]_____

PRINT YOUR & YOUR CHILD's NAME BELOW
