Monica's Danz Gym #4-25 Scurfield Blvd. Winnipeg MB R3Y 1G4

MDG Registration Form:	
Student's Name:	Registration date:
Age:(optional for Adult students) Da	te of Birth (DD/MM/YYYY)://
Parents Names (only if under 18 yrs of ag	ge)
Phone #: H C	(Circle preferred number.)
Mailing Address:	Postal Code:
Medical Concern (if applicable):	
E-mail:	(required initials)
policy is available at MDG. I consent to give MDG permission to gat	_
I consent to give MDG permission to gat purposes: Registration, communication activities, registration to dance convent medical emergency, when necessary for claims and conducting insurance. Signature of Participant/Guardian:	her personal information for the following about MDG's programs, events, and tions, festivals or competitions, in case of a r insurance coverage, managing insurance
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MDG COVID-19 AERIAL APPARATUS, ACROBATIC CIRCUS DISCIPLINE & DRAMA / DANCE CLASS LIABILITY WAIVER & RELEASE FORM

MDG classes offering training in the following apparatus and disciplines are considered in this document: Acro Danz, Handstand & Flex, Contortion, Clowning, Drama Club, Juggling, Cyr wheel, Aerial silks, hoop & trapeze, slings, straps, aerial yoga hammock, acro pole, tumble track.

PLEASE NOTE: It is a personal CHOICE to participate in Acrobatic, Dance, Drama and Aerial Circus Apparatus and Discipline training / classes at Monica's Danz Gym. If any individual does not agree or support the conditions outlined in this document, said individual is not required to participate in this learning opportunity.

In consideration of the services provided by Monica's Danz Gym Inc., their agents, owners, employees, volunteers, participants and independent contractors and all other persons acting in any capacity on their behalf, this document deems that Monica's Danz Gym is making its best effort to reduce the risk of transmission of COVID-19. But the safety of the community is in the hands of every one of us. I expressly agree and promise to abide by the safety precautions and protocols as outlined in the MDG COVID-19 PROTOCOL &PROCEDURE document.

I represent that I am in good health and have had no known exposure to COVID-19 and no symptoms of COVID-19 including cough, elevated temperature or sickness. I acknowledge that if I believe I have had any exposure to COVID-19, I will IMMEDIATELY cease attendance to Monica's Danz Gym until I can again warrant that I have had no known exposure for the 14 day period and alert the studio if I have been on the premises since my exposure.

I am aware that training during and after the COVID-19 pandemic involves certain inherent risks, dangers and hazards which can result in serious infection, personal or grave injury. I further acknowledge, understand, appreciate and agree that my participation may result in possible exposure to and illness from COVID-19. While protocols and personal discipline may reduce this risk, the risk of serious injury and/or illness is not fully possible to mitigate.

I hereby freely agree, to assume and accept all known and unknown risks of exposure to COVID-19, even arising from the negligence of the releasees or others. I assume FULL responsibility for my participation. I further recognize and acknowledge that the risks inherent in training can be greatly reduced by following the COVID-19 established protocols and precautions.

I accept for use "as – is" the equipment and small props to be used in activities governed by this agreement.

I hereby for myself, my heirs, executors and administrators waive, release and discharge any and all claims that I have or may have in the future toward Monica's Danz Gym Inc., its owners, administrators, directors, employees, agents, contractors, other participants of the premises on which the activity takes place, from ALL liability, claims, demands, losses, damages, on my account caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise, including negligent rescue operations.

PARENTAL CONSENT OPTION:

I hereby convenant and promise that I am the minor's parent and / or legal guardian, and on behalf of myself and the minor, I understand the nature of the above referred to activities and the minor's health, experience and capabilities. I believe the minor to be able to participate in such activity safely. I understand the risks involved as stated above in this document.

I hereby waive, release and discharge any and all claims that I have on the behalf of the minor and agree to defend, indemnify and hold harmless each of the releasees or otherwise, including but not limited to injury, negligent rescue operations, and/or exposure to infectious diseases and I further agree to defend, indemnify and hold harmless each of the releasees from any litigation expenses, attorney's fees, loss, liability, damage or cost which any releasee may incur as a result of any such claim.