

**PLEASE PRINT CLEARLY**

PARTICIPANT/S FULL NAME \_\_\_\_\_

BIRTHDATE/S \_\_\_\_\_

PARENT/ LEGAL GUARDIAN FULL NAME (if student is under 18) \_\_\_\_\_

\_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

PHONE \_\_\_\_\_ TEXT OK? \_\_\_ YES. \_\_\_ NO

EMAIL \_\_\_\_\_

**ALTERNATE EMERGENCY CONTACT:**

In the event that you are not available in an emergency, who should we contact?

NAME \_\_\_\_\_

RELATION \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ . TEXT OK? \_\_\_ YES \_\_\_ NO

**Please list any student allergies, challenges, special needs, or anything else you think we should be aware of:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PUBLICITY RELEASE:**

I hereby (check one of the following): DO \_\_\_\_\_ give my full consent DO NOT \_\_\_\_\_  
give my full consent to: Circus Moves, LLC and its program partners to use any or all photos, video images,  
and audio recordings of participant/s listed above.

Please initial here \_\_\_\_\_

**Circus Moves, LLC agrees and promises that none of these photos, videos, or materials will be used for profit or any purpose other than its own education and public information projects and promotion.**

*Continued on reverse...*

In consideration of being allowed to participate in lessons, workshops, programs, events, or activities, taught, directed, administered, or otherwise made available by Circus Moves, LLC as well as ANY of its employees, assistants, volunteers, or representatives, the undersigned acknowledges, appreciates and agrees that **the risks of injury from activities involved in this program are significant, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and by signing this document you agree to the following:**

1. I willingly and voluntarily assume all risks involved in my own, or my child's, participation in this program and in my/their use of the facilities and equipment related thereto. As parent or legal guardian of a participant in Circus Moves, LLC lessons, workshops, programs and activities, I recognize that potentially severe injuries, including permanent paralysis or death can occur in sports or activities involving height or motion, including but not limited to gymnastics, tumbling, acrobatics, trampoline, circus globe, rola bola/ balance board, stilt walking, rolling globe, dance, and other sports and physical movement.
2. Being fully aware of these dangers, I, on my own behalf and the behalf of my child(ren) and our respective heirs, administrators, executors and successors, hereby COVENANT NOT TO SUE and FOREVER RELEASE Circus Moves, LLC, its officers, officials, directors, shareholders, sponsoring agencies, sponsors, advertisers, other participants, employees or agents, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), with respect to all and any injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releasees or otherwise, to the fullest extent permitted by law; and,
3. I agree to defend, hold harmless and indemnify Circus Moves, LLC from any action, claim, expense or liability and all damages or injuries suffered arising out of the activities, performance, camps, workshops, or classes provided by Circus Moves, LLC and all related parties/persons/performers including, without limitation, those damages or injuries resulting from acts of negligence on the part of its officers, directors, shareholders, personnel and hold Circus Moves, LLC and its representatives harmless in their execution of this action; and,
4. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releases or others, and assume full responsibility for my participation; and,
5. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself or my child from participation and bring such to the attention of the nearest official immediately.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT. I FULLY UNDERSTAND THE TERMS STATED WITHIN, I UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

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**PARTICIPANT'S NAME**

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**PARTICIPANT'S SIGNATURE (or parent/guardian if under 18)**

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**DATE**

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**PRINT SIGNER'S NAME (if different from participant)**