

LIABILITY WAIVER FORM

This form must be signed and returned to the office before classes begin. The signature below must be of the parent or guardian of a child attending the University of Louisville Community Music Program (including siblings).

1. I agree to release the University of Louisville, their trustees, officers, directors, employees, volunteers, agents or assigns from any liability for damages incurred as a result of the use of University of Louisville facilities or participation in the Community Music Program. I also agree to indemnify the University of Louisville and their trustees, officers, directors, employees, volunteers, agents or assigns and holds them harmless from any and all action resulting from the use of these facilities or participation in the Dance Academy.
2. It is understood that each parent or guardian (or adult student) takes full responsibility for the supervision of their child (children)(self) outside of class time. Any injury or accident that occurs shall be the responsibility of the parent or guardian.
3. My child's (my) photo may be used for promotional purposes including print and internet.

My signature below signifies understanding acceptance of the terms listed above.

Name(s) of children attending the Community Music Program, including Siblings

---

Signature of Parent/Guardian (required) \_\_\_\_\_  
Or adult student

Date \_\_\_\_\_ please print parent/guardian name \_\_\_\_\_

Please include this form with registration and mail to:

U of L CMP  
School of Music  
Belknap Campus  
Louisville KY 40292