

Mile High Fusion Liability Agreement/Waiver Form and Photo Release

All participants MUST complete this form.

General Information: All workshop participants, students, staff, and observers, must complete and sign this form before partaking in any event, workshop, or social dance at MILE HIGH FUSION. Admission is not allowed if this form is not received prior to taking a participation and must be properly signed. If participant is under age 18, a parent or guardian must also sign this form. In this document MHF refers to: Mile High Fusion, its affiliate venues and studios, event sponsors, owners, volunteers, and contractors.

Physical Injury: I, the signing participant below, recognize and understand the risks of physical injury inherent to dance and dance training and fully assume those risks. I hereby release MHF from all liability for injuries sustained or illnesses contracted by me while attending or participating in any classes, dances, or events of the weekend. I agree to indemnify, defend, and hold harmless MHF for liabilities, costs and judgments arising from acts of omissions committed by me which result in injury, death or damage to any person or property. In case of physical injury or medical emergency, I hereby authorize Mile High Fusion to make necessary arrangements to transport me or my child to a medical treatment facility as necessary. All such transportation and medical treatment will be at my sole cost and expense. In extreme emergency, or if I am under 18 years of age, I understand that Mile High Fusion will attempt to notify the person(s) I have named during registration as my emergency contact(s) of my condition and how to reach me.

Personal Property: I understand and agree that it is my sole responsibility to safeguard my personal property and I hereby release MHF from all liability for loss or damage to my personal property while attending or participating in any classes, dances, or events of the weekend.

Photography: For valuable consideration received, I grant to Mile High Fusion the absolute and irrevocable right and unrestricted permission concerning any photographs or video that they have taken or may take of me or in which I may be included with others, to use, reuse, publish, and republish the photographs or video in whole or in part, individually or in connection with other material, in any and all media now or hereafter known, including the internet, and for any purpose whatsoever, specifically including illustration, promotion, art, editorial, advertising, and trade, without restriction as to alteration; and to use my name in connection with any use if Mile High Fusion so chooses. I release and discharge Event Photographers from any and all claims and demands that may arise out of or in connection with the use of the photographs, including without limitation any and all claims for libel or violation of any right of publicity or privacy. If I have significant objection to having my picture taken, I can follow the procedure in the [Photography Policy](#) to minimize how much I am photographed.

Agreement: I agree to abide by any rules, regulations, and policies set forth by MHF, including, but not limited to, the MHF Safer Spaces Declaration. If I choose to not abide by these, I agree that I will honor any such restrictions imposed, up to and including expulsion, and will not hold

MHF responsible nor will I expect an adjustment or reduction in any fees I have paid or agreed to pay.

In signing this Release, I acknowledge and represent that I have fully informed myself of the content of the liability waiver and photo release by reading it before I sign it, and I understand that I sign this document as my own free act and deed. I further state that I am at least eighteen (18) years of age and fully competent to sign this agreement; and that I execute this release for full, adequate, and complete consideration, fully intending to be bound by the same. I further state that there are no health-related reasons or problems which preclude or restrict my participation in this activity, and that I will pay any medical costs that may be attendant as a result of injury to me.

I have read this document and fully understand its contents.

_____ (Print Name)

_____ (Signed Name) _____
(Date)

If under 18, this must be signed by a parent or legal guardian:

_____ (Print Name, Legal Guardian)

_____ (Signed Name, Legal Guardian)

_____ (Date)