

Dance To Inspire Convention Registration Form

December 15, 2024 Woburn, MA Boston Hilton/Woburn Hotel

\$129 Convention \$189 Convention w/Mock

PLEASE SELECT PAYMENT METHOD:

Pay by Mail _____ Venmo _____ Paypal _____

All payments must be received no later than 14 days prior to convention date. Mailing Address: Dance To Inspire Box 742, Tewksbury, MA 01876

Venmo Address: @Valerie-Ddance Paypal Email: dancetoinspirenow@yahoo.com

Studio Name: _____ Studio Owner/Director: _____

Contact Phone: _____ Independent Entry: _____

Participants: Dancer's Name, Age, and Contact Phone (1 FORM PER DANCER)

1. _____

Mock? YES _____ NO _____ Is your Mock a Solo ? _____ Or a Duo/Trio? _____

Waiver

WAIVER AND RELEASE OF LIABILITY PLEASE READ this document in its entirety—it affects your legal rights. By registering for Dance To Inspire Dance Competition Winter Convention on 12/15/24 AND/OR participating in activities, you acknowledge your agreement with the terms of this WAIVER AND RELEASE OF LIABILITY. Upon request, we will provide you with a copy of this WAIVER AND RELEASE OF LIABILITY for your personal records. In consideration of the risk of personal injury while participating in dance, dance-instruction, and any other dance related activity (individually and collectively referred to as the "Activity"), and as consideration for the right to participate in the Activity, I hereby, for myself, my heirs, executors, administrators, assigns, or personal representatives, knowingly and voluntarily enter into this WAIVER AND RELEASE OF LIABILITY and hereby waive any and all rights, claims or causes of action of any kind whatsoever arising out of my participation in the Activity, and I do hereby release and forever discharge DANCE TO INSPIRE, LLC, its affiliates, managers, members, agents, independent contractors, attorneys, staff, volunteers, customers, on-site vendors, subtenants, heirs, representatives, predecessors, successors and assigns (collectively, "the Released Parties"), for any physical or psychological injury, including but not limited to illness, paralysis, death, damages, economical or emotional loss, and for any property damage that I may suffer as a direct result of my participation in the aforementioned Activity, including traveling to and from an event related to this Activity. In the event that any child, ward, or other person for whom I stand in loco parentis participates in the Activity, I consent to this Waiver and Release of Liability on behalf of such person.

Parent Signature: _____ Date: _____