



Holy Cross Zorianka Dancers Association  
7915-127 Avenue  
Edmonton, Alberta T5C 1R9  
Telephone: (780) 456-5259

## WAIVER AND CONSENT

To: Holy Cross Zorianka Dancers Association (hereinafter referred to as Zorianka), Edmonton, Alberta

I, the undersigned Dancer, acknowledge that my participation in dance and related activities with Zorianka, before, during or after rehearsal, performances or otherwise, and both within and outside Zorianka designated rehearsal studios or performance locations, including travel thereto or therefrom, (the "Activities"):

- a) is strictly voluntary, and,
- b) may result in the sustaining of Loss which includes but is not restricted to:
  - i. bodily or personal injury,
  - ii. damage to, or loss of, property; and
  - iii. consequential damage loss.

In consideration of being allowed to participate in the Activities with Zorianka, I accept any and all responsibility for, and risk of, any and all Loss or injury which I may sustain or incur by reason of my participation in the Activities, and save harmless Zorianka, its Directors, officers, servants, agents and employees from any and all claims which I, or any person with a legal right to claim through me, shall or may have for such Loss or injury, howsoever caused.

I further acknowledge that certain personal information, including my name or my child's name and photographic or video image, is collected, from time to time, by Zorianka and is required by Zorianka for its continued and effective operation. I hereby irrevocably consent to the use of such personal information by Zorianka in connection with its operation and, including but not restricted to, use in connection with any advertisement, marketing product, broadcast, publication, audio, or video recordings, still photographs and artistic renderings without compensation and I waive the right to inspect or approve any such use in connection therewith.

Dated at the City of Edmonton, in the Province of Alberta, this \_\_\_\_\_ day of \_\_\_\_\_, 2010.

### **Acknowledgement of Parent or Guardian (where Dancer is under 18 years of age)**

I, the undersigned Parent or Guardian of the Dancer named herein, who is in my actual custody, acknowledge that I have read and understand the Waiver and Consent to which this Acknowledgement is attached. I consent and agree to the terms and the binding effect thereof as they relate to my child and hereby indemnify Zorianka, its Directors, officers, servants, agents and employees from and against any and all claims which may arise.

\_\_\_\_\_  
Full Name of Parent/Guardian (please print)

\_\_\_\_\_  
Signature of Parent/Guardian

### **Acknowledgement of Dancer (18+ years)**

\_\_\_\_\_  
Full Name of Dancer (please print)

\_\_\_\_\_  
Signature of Dancer