



name:		
Phone:	Email:	
Emergency name & telephone:		
How did you hear about this class?		
This agreement is between Elizabeth Van Di appointed by Friends of Moorside Park and t	•	,
l,	, hereby agre	e to the following:
1. I am participating in ZUMBA® Fitness class Fitness classes require physical exertion that and I am fully aware of the risks and hazards	t may be strenuous and	
2. I understand that it is my responsibility to a ZUMBA® Fitness classes. I represent and w would prevent my full participation in ZUMBA	arrant that I am physica	
3. In consideration of being permitted to part responsibility for any risks, injuries or damag which I may incur as a result of participating	jes (known or unknown)	, property damage or loss of any kind in
4. In further consideration of being permitted and expressly waive any claim I may have a (known or unknown), property damage or los participating in any ZUMBA® Fitness class.	gainst the authorized Zu	ımba Instructor(s) for any injuries or damage
5. This is a legally binding Release, Waiver, authorized Zumba Instructor(s) for any injury participation in any ZUMBA® Fitness class. voluntarily by me, the undersigned Releasor administrators, and legal representatives.	r, death, property damag This Release, Waiver, D	ge or loss of any kind caused by my voluntar discharge and Covenant Not to Sue is made
6. I have read the above release, waiver of li understand that I am giving up substantial rig agreement freely and voluntarily and intend I liability. I voluntarily agree to the terms and c as I participate in any Zumba® Fitness class	ghts, including my right t by my signature to be th conditions stated above.	o sue. I acknowledge that I am signing the e complete and unconditional release of all This agreement remains in effect for as long
Participant Signature		Date
Parent / Guardian (for participants	s under 18)	Date