Dancer Agreement regarding COVID-19

Given that the COVID-19 situation is constantly evolving, we have to work together to try to keep each other safe and healthy.

Assumption of Risk: I understand and acknowledge that COVID-19 is a highly contagious disease that can lead to severe illness and death and contracting COVID-19 is an inherent risk associated with being in public places or in contact with or proximity to other individuals, including participating in activities with Georgetown Dance Company, notwithstanding any precautions taken by Georgetown Dance Company or any of its representatives, me, my child, or other dancers. I acknowledge that my child is voluntarily participating in activities with Georgetown Dance Company. By signing this Agreement, I agree that I am voluntarily assuming any and all COVID-19 health risks or financial risks associated with my child and I participating in Georgetown Dance Company activities, including contracting COVID-19, severe illness, death or transmission of COVID-19 and accept full responsibility for any and all such damage and injury. Initials: ______

My Obligations: I understand that Georgetown Dance Company may be implementing various practices and procedures, as may be updated from time to time, aiming to minimize the risk of contracting COVID-19 by any dancers, participants, parents or others involved in Georgetown Dance Company activities. These practices and procedures may be communicated verbally, in writing, by email, on a webpage and/or posted on signs. I agree that my child and I will abide by these practices and procedures, including, for example, temperature checks, wearing face coverings, and physical distancing. I agree to not attend or have my child participate in any Georgetown Dance Company activities if I or my child or anyone in our household is experiencing a fever or other symptoms. I acknowledge that Georgetown Dance Company may not permit me to attend or my child to participate in Georgetown Dance Company activities if my child or I do not follow the instructions in these practices and protocols or it otherwise determines that my child's participation presents a health risk. Initials: ______

Liability Waiver: I forever release and waive any and all claims the right to bring suit against Georgetown Dance Company and its managers, owners, employees, agents, teachers, volunteers or other representatives in connection with exposure, infection or transmission of COVID-19 related to participating in activities with Georgetown Dance Company. I understand that I am giving up my right to bring any claims against Georgetown Dance Company, to the extent permitted under applicable law, including for personal injury, death, or any other loss, including to someone related to me, as a result of any exposure, infection or transmission of COVID-19, and further give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen. Initials:

Date:	Signature:
	Name: