



RELEASE AND WAIVER FORM

Minor's Name

Name of Parent/Legal Guardian

Address

School Name

City State Zip

MAPDA Dance Competitions
Event Location

2020 MAPDA Season
Event Date

For good and valuable consideration, the recipient and sufficiency of which are hereby acknowledged, I _____, as parent or legal guardian of _____, a minor, hereby grant the permission to allow the Minor to participate in any Event of the 2020 Season conducted by the Mid-Atlantic Pom and Dance Association (MAPDA). I acknowledge and agree, in my own behalf and on behalf of the minor, that such participation subjects the minor to the possibility of physical illness or injury and will not hold MAPDA, its agents, or the Event Site liable for any cause.

I understand and give permission for the minor to be photographed and/or video taped to be used in or printed as deemed appropriate for promotion of any event conducted by MAPDA.

I, in my own behalf and on behalf of the minor, hereby warrant that I have read this Release and Waiver in its entirety and fully understand its contents.

Signature of Parent/Legal Guardian: _____

Date: _____

I, identified above as the Minor, acknowledge that I have read this Release and Waiver form.

Signature of Minor: _____

Date: _____