

WAIVER

Participation in this sport/activity may involve risk of injury. As a parent/guardian/partici pant I am aware of these hazards and of the ability to participate. In consideration for participation in this program, I hereby for myself, my heirs, my executors, administrators waive and release all rights and claims against the Zumba Fitness, Zumba with Gorica, its officers, employees, agents, volunteers, supervisors, places where classes are being held, from all losses, injury, damages, fees, and other expenses, arising out of or in connection with participation in the activity/sport. The above named cannot be responsible for

any aggravation or injury caused as a result of preexisting physical disabilities; including, but not limited to, allergies. The Zumba Fitness, Zumba with Gorica, will be notified of any such special needs or sensitivities in writing prior to starting the fitness program. The Zumba Fitness, Zumba with Gorica, encourages you to carefully review the website www.zumbawithgorica.com and/or FaceBook Page: Zumba with Gorica in order to learn more about this program prior to your first Zumba Class.

Locations:

"Ultimate Sports Academy" 201 Allard Dr, Manchester, NH 03102

PLEASE PRINT:	
NAME:	
EMAIL:	
DATE:	
PARTICIPANT SIGNATURE:	
(if under 18 years old parent or guardian is required)	

How did you find about us: