

***Contact Information & Liability Waiver***

1. In consideration of being allowed to participate in the personal **dance** activities of **Jennifer V. Jones**, dba **Flagstaff Belly Dance** and the use of adequate lavatories, and dance space at:

**Human Nature Movement Arts Studio located at 4 West Phoenix Ave. Flagstaff, AZ 86001,** in addition to the payment of any fee or charge, I do hereby forever waive, release and discharge from any and all claims or liabilities for injuries or damages to my person and/or property, including those caused by the negligent act or omission of any of those mentioned or others acting on their behalf, arising out of or connected with my participation in said activities of dance. (PLEASE INITIAL: **\_\_\_\_\_\_\_\_\_\_**)

2. I will honor my body and be responsible for it. (PLEASE INITIAL: )

3. I will be responsible for my own belongings. (PLEASE INITIAL: )

4. I will show respect and courtesy to my teacher and my fellow students. (PLEASE INITIAL: \_\_\_\_\_)

5. I will leave the dance space in a clean and orderly condition. (PLEASE INITIAL: )

Signature: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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Mailing Address: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: ­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E- Mail Address: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Facebook Page: <https://www.facebook.com/Flagstaffbellydance> Please send Friend Request!

Preferred Contact Method: **Please circle**. Text, Facebook Msg, Email, Phone, Snail Mail

In the event of an emergency please contact the following person(s) in the order presented:

**Emergency Contact: Name, Relationship, Contact Telephone**