

**Ballet Academy Ventura
2750 E. Main Street, Ventura, CA
Release form 2009-2010**

Agreement of Release and Waiver of Liability:

I, _____, hereby agree to the following:

1. That I am participating in the ballet curriculum and fitness classes, offered by Ballet Academy Ventura (BAV) during which I will receive information and instruction about health and fitness. I recognize fitness programs require physical exertion, which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.
2. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in the ballet classes, programs, or workshops. I represent and warrant that I am physically fit and I have no medical condition, which would prevent my full participation in the ballet classes or workshops.
3. In consideration of being permitted to participate in the ballet classes, programs or workshops, I agree to assume full responsibility for any risks, injuries or damages known or unknown which I might incur as a result of participating in the program.
4. In further consideration of being permitted to participate in the ballet classes, programs or workshops, I knowingly, voluntarily and expressly waive any claim I may have against BAV for injury or damages that I may sustain as a result of participating in the program.
5. I, my heirs or legal representatives, forever release, waive, discharge and covenant not to sue BAV for any injury or death caused by their negligence or other acts.

I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

Date: ___/___/___ Signature: _____
(Parent/Guardian if under 18 year or student if over 18 years)

Witnessed by: _____ Date: ___/___/___

**Ballet Academy Ventura and Ventura County Ballet Company
Photo/Video Release**

I hereby agree and consent that the Ballet Academy Ventura ("BAV") and the Ventura County Ballet Company ("VCBC") and its successors, assigns, and licensees, may use my name, photograph and video for BAV and VCBC promotions while a student and in the future. I hereby waive, as to BAV and VCBC and its successors, assigns, and licensees, all personal rights and objections to the use of my name, image and likeness in BAV and VCBCV promotions.

I now waive all personal right and objections to any use of my image in connection with the use photography containing my photograph, for any picture, television, radio, internet purposes and performances thereof, accompanied by any narration and dialogue whatever, and the publicity in connection with advertising purposes. I understand that the PRODUCER will do so in full reliance on the forgoing permission.

I understand that BAV and VCBC will use photographs/video to promote events for performances in reliance on the foregoing permission, secure grants and general advertising.

I have read this release and understand and agree to its terms. I am the parent or legal guardian of _____ and I have the legal authority to execute the above release on the minor's behalf.

Date: ___/___/___ Signature: _____

I have read this release and understand and agree to its terms. I affirm that I am at least 18 years of age, and have the right to contract in my own name.

Date: ___/___/___ Signature: _____

Witness to above photo release: _____ Date: ___/___/___