



# Wimberley DANCE ★ ELITE

## Spring Bring a Friend Week

Monday February 3rd - Thursday February 6, 2025

Your friend would like to invite you to the following classes:

Class name: \_\_\_\_\_

Class day and time: \_\_\_\_\_

If you plan on joining us, please sign the waiver below. You can either email it to us at [danielle@wimberleydanceelite.com](mailto:danielle@wimberleydanceelite.com) or send it with your child to class. They will need the waiver to be signed in order to participate.

Waiver:

*I understand that risk of injury is inherent in any physical activity and I, on behalf of myself and my child, knowingly and voluntarily accept that risk. I, the undersigned, for myself, my heirs, administrators, and executors, hereby waive and release Sheridan Roalson individually and Wimberley Dance Elite LLC and its staff from any and all claims or damages of any kind arising out of my child's participation in the exercise and/or dance program of WDE. I further certify that the aforementioned student is in proper physical condition to participate in the exercise/dance program and that he/she has been examined by a licensed physician and found to be in proper physical condition to participate in said program. I, the undersigned, do hereby authorize Sheridan Roalson or designated agents (being teachers or administrators employed by WDE) to obtain medical treatment for my said child in emergency situations where I cannot be reached in time to authorize the treating physician to provide such emergency medical services. I understand that I am responsible for any medical expenses and that the absence of health insurance does not make WDE responsible for payment of medical expenses. This authority includes the power to authorize any and all treatment deemed necessary under the circumstances by a licensed physician. This power is in essence a power of attorney and shall remain in effect for one year from the date of acceptance.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Student Name: \_\_\_\_\_

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

Email: \_\_\_\_\_