



Ms. Tiffany's Dance Medical Agreement (Online Training)

I, _____, give Tiffany Davis permission to contact me or my child via the web conferencing application of my choice. I understand that online training is not meant to replace in-studio training, but to serve as supplemental training in the event that in-person classes cannot be held. By participating in this video lesson with Tiffany Davis, I agree that I have an area with enough space to move freely without restriction.

I, _____, (or my child) have chosen to participate in dance training offered by **Tiffany Davis**. I recognize that the training may involve strenuous physical activity. I hereby affirm that I (or my child) am in good physical condition and do not suffer from any known disability or condition which would prevent or limit my participation in this dance training. I acknowledge that my enrollment and subsequent participation is purely voluntary and in no way mandated by **Tiffany Davis** or **Ms. Tiffany's Dance**.

In consideration of my participation in this class, I hereby release **Tiffany Davis** from any claims, demands, and causes of action as a result of my (or my child's) voluntary participation and enrollment. I fully understand that injuries of varying severity may occur as a result of my enrollment and subsequent participation in this class and I, _____, hereby release Tiffany Davis from any liability now or in the future for conditions that I (or my child) may obtain.

Student's name:

Parent/Guardian Signature:

Date: _____