



Armetta's Grand Jeté Studio of Dance  
 17 E. Main Street, Macungie, 610-393-5225  
 www.GrandJeteDance.com

## Release Form

Parents Name		
Child's Name		
Address		
City	State	Zip Code
Email	Telephone:	
Any health or physical restrictions, including allergies?		

I \_\_\_\_\_, understand the physical demands and risks associated with the activities and policies of "Armetta's Grand Jeté Studio of Dance". I have disclosed any medical and all physical or other conditions and/or limitations that might affect my participation. I hereby release and remise, "Armetta's Grand Jeté Studio of Dance", and all of its employees, agents, and others assisting in the instruction or participation of my self, from any and all liability or claim resulting from any Studio activity.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date