



Student Waiver

Student's Name _____

PHOTOGRAPHIC AND VIDEOGRAPHIC WAIVER

I hereby irrevocably consent to and authorize the use and reproduction by Festival Ballet Providence of any and all photographs, recordings, videotapes and/or other reproduction or likeness of the student's person or characteristics (reproductions) which have been secured by or for Festival Ballet Providence, for any purpose whatsoever, without compensation to the student. All reproductions shall constitute the property of Festival Ballet Providence, solely and completely. Further, I assign and release all rights to said reproductions and authorize Festival Ballet Providence, or others authorized by it, to exhibit, broadcast, and/or distribute or otherwise further reproduce said newspapers, closed circuit television, web site, film, cable, and television, with or without compensation in perpetuity. I also release, discharge, and agree to hold harmless the producers or any persons, or entities acting under their permission or authority from any liability arising from the use of said reproductions.

- I/we agree to the stated photographic and video waiver
- I/we **do not** agree to the stated photographic and video waiver

I, the above named student or guardian of the above named student, hereby consent to the above named student's participation in Festival Ballet Providence School Programs.

I have been cleared by my physician to participate in physical exercise and dance.

I am aware that all forms of dance and the rigorous exercises associated with it place unusual stress on the body and carry with them the possible risk of physical injury. I assume this risk and agree that Festival Ballet Providence, its staff, and the Festival Ballet Providence facilities shall not be liable in any way for injuries sustained during attendance in this program.

I have read the Festival Ballet School Handbook (available on our website www.festivalballetprovidence.org) and understand all information pertaining to the training, curriculum, financial and general policies of our school.

Student Signature: _____ date ____/____/____

Guardian Signature: _____ date ____/____/____