

W A I V E R C O P I E S

MEDIA WAIVER

I hereby grant permission to The Studio of Dance and Arts, its representatives, instructors, to take and use visual/audio imagery of me, including but not limited to photographs, videos, and audio recordings, for promotional and educational purposes.

I understand that the images and recordings may be used in various media formats, including but not limited to print, online, social media, broadcast, and presentations. I understand that these images may be used for a variety of purposes, including advertising, marketing, publicity, and educational materials.

I waive the right to inspect or approve any finished product in which my image or voice may appear. I release The Studio of Dance and Arts from any claims, demands, or liabilities arising out of or in connection with the use of these images and recordings, including but not limited to any claims for defamation, invasion of privacy, or infringement of moral rights, rights of publicity, or copyright.

I understand that my participation is voluntary and that I will not receive any financial compensation for the use of these images and recordings. I also understand that I may be identifiable from the images and recordings and that The Studio of Dance and Arts will take reasonable measures to protect my privacy and dignity.

I am of legal age and have read and understand the contents of this Media Release Waiver Form. I am aware that by signing this form, I am giving up certain legal rights.

Participant's Information:

Full Name: _____

Date of Birth: _____

Parent/Guardian Information (if participant is a minor):

Full Name: _____

Relationship to Participant: _____

Email Address: _____

Date of Agreement: _____

Participant's Signature (if 18 years or older):

(Signature)

Parent/Guardian Signature (if participant is a minor):

(Signature)