## Parent Waiver and Release of Liability for Minors

I, <b>Name</b> the undersigned as the parent or legal guardian of the child named below, do hereby give my full consent and approval for my child to participate as a member of @theBarre Studios	
Pilates/Yoga, Barre classes and/or group fitness classes:	
y child's involvement and/or participation in private Pilates/Yog	a, semi-private Pilates/Yoga, barre Classes and/or group
fitness classes is voluntary, and both my child and myself are ac	ting under our own free will.
I understand in group fitness there is a risk of danger, bodily ha	rm, injury, emotional stress, or death as a result of my
participation. The risks arise from private Pilates/Yoga, semi-pri	vate Pilates/Yoga, Barre classes and group fitness classes
and/or equipment that can cause the risk, with the acknowledg	ement that potential risks are not limited to this list.
There is the potential for risks and dangers that may not be obv	ious or reasonably foreseeable at this time.
My child does not have any medical ailments, physical limitation participate in private Pilates/Yoga, semi-private Pilates/Yoga, Ba	
@theBarre by: Streamlined Bodies undertakes no direct legal o	financial responsibility for my child's personal safety or
well-being when he/she is participating in private Pilates/Yoga, fitness classes.	semi-private Pilates/Yoga, Barre classes and/or group
On behalf of my child and myself, I do voluntarily elect to acceptimited to, those outlined in this agreement.	t and solely assume all risks of injury, including, but not
I forever release @theBarre by: Streamlined Bodies and all inst	ructors working at said company and the principal Liza
Hodette Gishen-Kloeckner from any and all claims and causes o	f action that I, my child or our representatives now have o
may have in the future for personal injury, property damage or	wrongful death occurring to my child, arising out of
participation in private Pilates/Yoga, semi-private Pilates/Yoga,	Barre classes and/or group fitness classes.
I am 100% liable for all medical expenses incurred as a result of	any injury or property damage during my child's
participation in private Pilates/Yoga, semi-private Pilates/Yoga,	Barre classes and/or group fitness classes.
In the event that any one or more of the provisions of this agree	ement shall be held to be invalid, illegal, unenforceable or
in conflict with the law according to the jurisdiction of the state and shall remain in full force and effect.	of NSW, the remaining portions will not be invalidated,
This is a legally binding contract, but it is not meant to pronoun	ce any claims or defences that are legally prohibited.
I attest that I have read and understand this document, and agr	ee to all the provisions listed above.
Parent or Guardian name:	Signature:
Date:	
Witness Name:	Signature·