



UMOJA DANCE STUDIO SUMMER CAMP
**HOLD HARMLESS /MEDICAL RELEASE
AGREEMENT**

July 1 – 19, 2019 Ages 5-16
9am – 4pm

2120 Springfield Ave
Vauxhall NJ 07088
862-621-9130
umojadance.com
Karen L. Love, Artistic
Director

The participant agrees and understands that the Umoja Dance Company carries insurance covering its legal liability. The participant accepts all risks of participating in a dance company. I agree that I will not make a claim against or sue the Umoja/Usaama Dance Company, or any of its officers or employees for injury or damage resulting from my participation.

I have submitted to the Artistic Director in writing any information concerning the medical condition of my child. If a form has not been submitted to the company, it is mutually agreed upon that your child has been evaluated by a doctor and is considered to be in good condition to participate in the camp.

In case of emergency, I understand every effort will be made to contact the parent/guardian. In the event I cannot be reached, I hereby grant permission to the adult leader to secure proper treatment for my child.

I have carefully read this agreement and fully understand its contents.

Camper Name _____

Parent/Guardian Signature _____

Date _____