



Hālau Hula I Ka Lā

Release of Liability

Please Read Carefully - This Affects Your Legal Rights

You are advised to consult your Physician before any dance/fitness program.

In exchange for participation in the activity with **Hālau Hula I Ka Lā** organized by **Joydee Vicencio-Padua** of Clovis, California, 93611 and/or use of the property, facilities and services for **Hālau Hula I Ka Lā**, I agree for myself and (if applicable) for the members of my family, to the following:

1. I agree to observe and obey all posted rules and warnings, and further agree to follow any oral instructions or directions given by **Hālau Hula I Ka Lā**, or the employees, representatives or agents of **Hālau Hula I Ka Lā**. I agree that employees, representatives or agents of **Hālau Hula I Ka Lā** reserve the right to refuse service and may terminate membership at any time.
2. I recognize that there are certain inherent risks associated with the above described activity and I assume full responsibility for personal injury to myself and (if applicable) my family members, and further release and discharge **Hālau Hula I Ka Lā** for injury, loss or damage arising out of myself or my family's use of or presence upon the facilities of **Hālau Hula I Ka Lā**, whether caused by the fault of myself, my family, **Hālau Hula I Ka Lā** and/or other third parties.
3. I agree to indemnify and defend **Hālau Hula I Ka Lā** against all claims, causes of action, damages, judgments, costs or expenses, including attorney fees and other litigation costs, which in any way arise from myself or my family's use of or presence upon the facilities for **Hālau Hula I Ka Lā**.
4. I agree to pay for all damages to the facilities used for **Hālau Hula I Ka Lā** caused by myself or my family's negligent, reckless, or willful actions.
5. Any legal or equitable claim that may arise from participation in the above shall be resolved under California law.

Participant Signature or Guardian: _____

Date: _____

Hālau Hula I Ka Lā: _____

REGISTRATION AGREEMENT

I HAVE READ *Release of Liability* DOCUMENT AND UNDERSTAND IT. I FURTHER UNDERSTAND THAT BY SIGNING THIS RELEASE, I VOLUNTARILY SURRENDER CERTAIN LEGAL RIGHTS.

PARTICIPANT NAME: _____ **DOB:** _____

PARENT/GUARDIAN (if under 18): _____

PHONE NUMBER: _____ **EMAIL:** _____

HOME ADDRESS: _____

Registration Fee	
Tuition	
T-shirt	
Pa'u	
TOTAL	

I agree to pay \$ _____ every (circle) MONTH 3MOS

and have paid \$ _____

on (date of registration) _____

Cash Card Check # _____

Hālau Hula I Ka Lā: _____

PARTICIPANT/GUARDIAN SIGNATURE: _____

DATE SIGNED: _____