Liberty Swing Dance Championships Formation Team Waiver Form

Instructions:
Please print this form. All team members must sign the LSDC Event Waiver in order to compete. Please submit this form with your registration form or mail separately to: Liberty Swing Dance Championships 13 Briarwood Path Clark, NJ 07066

Team Contact Information			
Team Name:		**Contact Person:**	
City, State:		**Contact Phone:**	
Choreographer:		**Email Address:**	

LSDC Event Waiver
Submission of this form stipulates to the following: The signatory(ies) and the party(ies) listed below agree to hold the organizers of this event and their agents, heirs and assigns harmless from all suits, claims or demands of every kind and character arising out of and in conjunction with LSDC and/or The Two Johns Corp, individually or collectively. I hereby authorize the reproduction, sale, copyright, exhibition, broadcast and/or distribution of any event videotape without limitations. I understand the physical risks of entering dance competitions and social dancing and assume full responsibility for any injury or personal damages resulting from LSDC. I certify that I am 18 years of age or older, applicable to Legal Guardian if I am under 18 years of age.

Print Name	**Signature**	**Date**

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