

STUDIO WAIVER AND GENERAL RELEASE OF LIABILITY

Studio Name	Studio Representative				
Street Address:	ress:Apt./Unit Number:				
City:	State:Zip Code:				
Email:	Phone Number:				
Event Location:					
	ous nature of the Coronavirus /COVID-19 and that the CDC and many other public ommend practicing social distancing.				
=	Applause Talent Presentations, Inc ("Applause") has put in place reduce the spread of the Coronavirus /COVID-19.				
attendance will not become exposure to the Coronavir myself and others. I volunt acknowledge that I am incomply with all set. To the best of my Nobody associated in the incomply with all set. No one Is experificable in the incomplete in the in	internationally within the last 14 days. to a highly impacted area within the United States of America in the last 4 ed with my studio has been exposed to someone with a suspected and/ of the Coronavirus/COVID-19. In diagnosed with Coronavirus/COVID-19 and not yet cleared as non-contagious by state or authorities. Dowing all CDC recommended guidelines as and limiting my exposure				
those associated with my stucompensation for damage of Talent Presentations, Inc or I understand that this release associated with my studio millness, death, medical treatmevents sponsored by Applau	e discharges Applause Talent Presentations, Inc from any liability or claim that anyone ay have against Applause Talent Presentations, Inc with respect to any bodily injury, nent, or property damage that may arise from, or in connection to our attendance at				
ACCEPTED AND AGREED BY: Printed Name	Date				

Signature_