



**FRISCO INDEPENDENT SCHOOL DISTRICT  
DANCE Inherent Risk Sheet**

**INHERENT RISKS OF DANCE:**

Dance is reasonably safe as long as certain guidelines are followed, but there is the inherent risk of injury as in any athletic activity. Dancing and Dance Training are anaerobic/aerobic activities which include stretching, leaping, high kicking, and turning. Immediately inform your instructor of all injuries and/or chronic conditions.

Although the probability of injury is minimized if you practice correctly, there is always the possibility of one occurring. Injuries that can occur in dance include, but are not limited to, the following: blisters, muscle strains, ligament sprains, joints and muscle soreness, abrasions, contusions, stress fractures, broken bones, spinal cord injuries involving paralysis, and even death. However, if you take certain precautions, the possibility of such injuries will be largely decreased.

**BE SURE TO CONSISTENTLY ABIDE BY THE FOLLOWING GUIDELINES:**

- Always practice in the presence of a qualified instructor
- Always warm-up and stretch appropriately before dancing
- Do not attempt anything you do not know how to perform safely
- Always dance in an area free from obstruction
- Always use proper footwear and wear appropriate practice clothes....never dance in socks, too slippery
- Do not dance on uneven ground, wet surfaces, or concrete.
- Report all injuries to the instructor as soon as they occur
- Follow all trainer and doctor recommendations
- Never wear jewelry of any kind or chew gum when dancing
- Always have your hair pulled back from your face and shoulders
- Always ask for assistance or advice if unsure of something
- NEVER stunt or tumble unless an instructor is present

I have read the preceding warning. I thoroughly appreciate and understand the assumption of risks inherent in dance participation. I acknowledge that I am physically fit and am voluntarily participating in this activity. Furthermore, the school is not liable for any injury incurred while doing any physical activity associated with this dance clinic.

Student Name (print) \_\_\_\_\_

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Parent Name (print) \_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Parent Contact: Phone # \_\_\_\_\_

Phone # \_\_\_\_\_

\*please provide two numbers at which a parent/ guardian can be reached\*