American **A**ssociation of **I**ndependent **B**allroom **P**rofessionals

Studio Information & Release Form

Studio:_____ **Phone:**_____

Address:_____

City:_____ **State:**____ **Zip:**_____

Fax:_____ **Email:**_____

Contact Person:_____

Release Agreement

The Competition organizers, their employees, & associates cannot be held responsible for any injuries sustained by any persons attending this event, including spectators. Each person attending in any capacity does so entirely at their own risk. No responsibility can be assumed by the organizers for lost or stolen articles in any part of the facility.

By my signature below I confirm I have read & understand the above statement & agree to comply with this agreement.

Print Name:	Signature for Release Form	PRO or AM	M or F