



Parental waiver

I, the undersigned:

Father - Mother:

Authorize my/our daughter / son:

to participate in the classes, workshops and sporting competitions organized by the association Arabesque and Carole Massoutié as well as to travel between the school and the dance studios for the duration of the sports season from September 1st 2022 to August 31st 2023.

Work number	
Home landline	
Cell phone	
E-mail	

Social security number	
Complementary insurance	

Medical history, allergies, medical treatments

I accept that the association and Carole Massoutié may take all the necessary measures in the case of an emergency (medical care, hospitalization ...), provided that I/we are informed as soon as possible.

I accept that the association and Carole Massoutié cannot be held responsible for any accidents that may occur during the lessons, workshops and sporting competitions organized by the association Arabesque and Carole Massoutié, as well as during the journey between the school and the dance studios.

Date:

"Read and approved"

Signature: