DANCE FOR PARKINSON'S HITS THE ROAD!
ENROLLMENT FORM AND LIABILITY RELEASE

PRINTED NAME: _____ DATE:_____

As a condition of my participation in Dance for Parkinson's Hits the Road! (the "Program") by Ruth Davidson Hahn & Company (RDH&Co), York General Hospital and Parkinson's Nebraska, I agree that:

1. I am physically able to participate in the Program, and have not been advised otherwise by a medical professional.
2. I agree to comply with any and all instructions, information, and rules, for participation in the Program.
3. I acknowledge that the Program may involve risk of physical injury and I accept those risks, and assume all responsibility for my participation and waive any claims against RDH&Co, York General Hospital and Parkinson's Nebraska for any and all injuries arising out of my participation in the Program, and further agree to indemnify, defend and hold RDH&Co, York General Hospital and Parkinson's Nebraska harmless from and against any and all claims for damages, injuries, losses, liabilities and expenses relating to, resulting from and arising out of my participation in the Program.
4. I intend that this waiver of liability against RDH&Co, York General Hospital and Parkinson's Nebraska shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law; which shall be governed by and construed under the laws of the State of Nebraska. If any part of this document is found unenforceable, all other parts shall be fully enforceable.
5. The participation payment is a single payment for the entire Program paid at the first class of the current series, though single session payment is accepted. We will charge you a $15 fee for returned checks or credit cards due to insufficient funds.

SIGNED: _____