

COSMOPOLITAN BALLET THEATRE

TRAVEL RELEASE FORM

I, _____, a participant in Cosmopolitan Ballet Theatre's (CBT) 2024 Summer Intensive Workshops, acknowledge that travel to foreign countries may involve many risks not known to me or to Cosmopolitan Ballet Theatre, its directors, faculty, employees, or anyone accompanying this program, or their heirs or estates which may not be foreseen or reasonably foreseeable by any of us at time or at the time of the travel Program in which I may participate, and which may not normally be associated with travel in the US, including, but not limited to terrorism, diseases, search and/or seizure of property by customs or other governmental authorities, personal liability, risk of personal injury to me including disability or death, damage to property belonging to me and others, differing customs and legal requirements. I knowingly and voluntarily agree to assume any and all risks associated with such travel. In exchange for being permitted to participate in CBT's 2024 Summer Intensive Workshops, I agree to the following:

- My participation is completely voluntary and is not required.
- I bear full legal and financial responsibility for myself, including responsibility for all indebtedness or other legal obligations incurred by me while I am abroad.
- Cosmopolitan Ballet Theatre reserves the right to require my withdrawal from the tour if it is determined that my continuation would be detrimental to myself, to others, or to the program. Return passage and any other expenses due to such involuntary withdrawal are to be defrayed by me.
- My presence in another country exposes me to risks that I may not be exposed to in the United States.
- As a participant I will be subject to the laws of the destination countries.
- I release Cosmopolitan Ballet Theatre and its directors, faculty, employees, or anyone accompanying this program, or their heirs or estates from any and all claims, demands and causes of action whatever arising out of my participation in 2024 Summer Intensive Workshops, including but not limited to: loss of property, illness, personal injury or death suffered by myself.
- I understand that in order to participate in this program I need to be insured overseas. Should my insurance not cover me abroad, I agree to purchase a travel policy.

I certify that I have read the above provisions of this Travel Release Form, understand them, and agree to be legally bound by them.

Signature of Participant

Date

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MEDIA RELEASE FORM

Permission is granted Cosmopolitan Ballet Theatre to use photographs and other recorded media of students for education, presentation, instruction, publicity, or other purposes as determined by Cosmopolitan Ballet Theatre. I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback.

Signature of Participant

Date