



## HEALTH + SAFETY CONDITIONS WAIVER

I acknowledge that myself/my child; \_\_\_\_\_  
with the underlying conditions of;

\_\_\_\_\_

have taken the necessary precautions and doctors advice to allow myself/my child to safely attend dance classes at Amy Newton Dance Studios among the covid-19 crisis. And that I have read the new Terms, rules and conditions outlaid for Amy Newton Dance Studios in line with the Victorian Department of Health Human Services.

Signed: \_\_\_\_\_

Printed: \_\_\_\_\_

Dated: \_\_\_\_\_

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