



Zumba Release Form

I _____ waive and release all claims against BFOD dba as ZumbaXpress, Zumba Instructors or any other persons engaged in classes, during my participation, and agree to hold the BFOD harmless from any and all liability relating to the name above, for any personal injury or illness that may be suffered or any loss of property that may occur.

Signed at Dallas, Texas, on the _____ day of _____, year _____

Signature _____

Address _____

_____ Zip _____

Email _____

Telephone _____