

WAIVER AND EMERGENCY INFORMATION SHEET (PLEASE PRINT)

STUDENT'S FULL NAME _____ DATE OF BIRTH _____

ADDRESS _____ PHONE (____) _____ - _____

CITY _____ STATE _____ ZIP _____

ARE YOU CURRENTLY IN GOOD HEALTH? ____ YES ____ NO ARE YOU ON ANY MEDICATION? ____ YES ____ NO

DO YOU HAVE ANY INJURIES/CONDITIONS/ALLERGIES OF WHICH THE STUDIO SHOULD BE AWARE? ____ YES ____ NO

PLEASE LIST: _____

IN CASE OF EMERGENCY, PLEASE CONTACT THE FOLLOWING (MUST LIST TWO):

NAME _____ RELATIONSHIP _____ HOME PHONE (____) _____ - _____

*REQUIRED: CELL PHONE (____) _____ - _____

NAME _____ RELATIONSHIP _____ HOME PHONE (____) _____ - _____

*REQUIRED: CELL PHONE (____) _____ - _____

LIABILITY WAIVER:

1. It is understood and agreed that the above mentioned student has reason to believe that he or she is in good health and is physically capable of participating in the instruction and practice of classes at the Picture Us Different Dance Studio, hereinafter "the Studio."
2. It is further understood and agreed that the student and legal guardian (if student is under 18 years) hereby indemnify the Studio from any and all liability and expense (including reasonable attorney's fees and costs of defense) which it may incur or suffer as a result of:
 - i) the failure of any student listed herein to follow the Rules and Regulations of the Studio
 - ii) any and all claims or causes of action of or on behalf of the student relating to or arising out of Loss, Damage, or Injury sustained by such student while in, on, or upon, or while enroute to the Studio
 - iii) any breach of this agreement

It is understood that even though all classes and practice sessions conducted by the Studio are supervised by qualified instructors and all reasonable care is taken to prevent injuries and minimize accidents, that due to the range of motion and technical challenges of the classes held at the Studio, no assurance can be given by the Studio that injuries will not occur.

In accordance with the aforementioned paragraph, I _____ the student, (if 18 years of age or older) or I _____ the parent or guardian of _____ the student (if under 18 years), do hereby waive, release, and forever discharge any and all rights and claims whatsoever for any damage which I may have against the Studio including its instructors and directors, and I give permission for any photos and/or videos of myself and/or my child/children to be used promotionally for Picture Us Different Dance Studio, Inc.

THE STUDIO IS NOT RESPONSIBLE FOR ANY ITEM OR PERSONAL PROPERTY WHICH IS LOST, DAMAGED, OR DESTROYED WHILE ON THE PREMISES.

DATE _____ 20_____

SIGNATURE OF STUDENT (IF 18 YEARS OR OLDER)

SIGNATURE OF PARENT OR GUARDIAN
(IF STUDENT IS UNDER 18 YEARS OLD)

RELATIONSHIP TO STUDENT



PICTURE US DIFFERENT DANCE STUDIO, INC.

SUMMER DANCE REGISTRATION FORM

PLEASE FOLLOW THESE STEPS:

- 1) Complete and sign the registration form and waiver
- 2) Send registration form along with your **payment in full and completed waiver** to the studio
- 3) Classes are limited and fill up quickly! **Your tuition payment will hold your place in class.**

Please note: there will be **NO CONFIRMATION sent to you; you will only be notified if your class choice is full.*

NO REFUNDS OR CREDITS FOR ANY REASON

PICTURE US DIFFERENT DANCE STUDIO, INC. - SUMMER 2019

STUDENT'S FULL NAME _____

PARENT'S FULL NAME _____

HOME PHONE (_____) _____ - _____ PARENT CELL PHONE (_____) _____ - _____

ADDRESS _____

CITY/TOWN _____ STATE _____ ZIP _____

STUDENT'S AGE _____ STUDENT'S BIRTH DATE _____

DANCE EXPERIENCE & WHERE _____

M3 Workshop - \$260 per student, per week (Monday - Thursday)

Ages 8 - 12: July 8 - 11
5:30p - 8:00p

Ages 13 - 17: July 15 - 18
5:30p - 8:00p

Company / 18+ July 22 - 25
7p - 9:30p

8 Summer Dance Classes: July 8th - Aug 1st

Pre-Level (Tues-Thurs / 4p-5p) **\$168**

Level 1 (Tues-Thurs / 5p-6p) **\$168**

6 Summer Dance Classes: July 8th - 24th

Cardio/Strength/Dance
(Mon - Wed / 7p-8p) **\$126**

***NOTE: If more than one student from a family is registering, please attach a separate sheet of paper with the above information for each.**

I have read the studio regulations and agree to abide by these rules as long as my child/children and/or I continue to participate in classes at the "Picture Us Different Dance Studio, Inc." I give permission for any photos and/or videos of myself or my child/children to be used promotionally for Picture Us Different Dance Studio, Inc.

SIGNATURE OF STUDENT OR PARENT IF STUDENT IS UNDER 18 YEARS

DATE _____

Thank you!

Picture Us Different Dance Studio, Inc. (847) 692-3600 www.puddance.com