BALLET ARTS

2017 / 2018 Season

Over 50 years of Professional Dance Instruction

REGISTRATION FORM

STUDENT INFORMATION

Student Name (First...Last) _____

Parent Name (First...Last) _____

Street Address _____

City _____   Zip Code _____

Home Phone _____   Cell Phone _____

E-mail _____

Emergency Contact Name(First...Last): _____

Emergency Phone: _____

AGREEMENT AND RELEASE

I understand and agree that in participating in any dance class, workshop, rehearsal or performance, there is a possibility of physical injury or death. Therefore, I voluntarily agree to assume all risks and responsibility for any such injury or accident, which might occur to me or my child during any Ballet Arts classes, rehearsals, performances, or activities. I also exempt, release, and indemnify Ballet Arts LLC, its owners, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students from any and all liability claims, demands, or causes of action whatsoever from any damage, loss, injury, or death to me, my children, or property which may arise out of or in connection with participation in any classes or activities conducted by Ballet Arts or Conejo Civic Ballet Company. I further hereby voluntarily agree to waive my rights and that of my heirs and assigns to hold Ballet Arts LLC or Conejo Civic Ballet Company, its owners, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students liable for such damage, loss, injury, or death. I understand that I should be aware of my physical limitations and agree not to exceed them. If I am signing this waiver for my children, I certify that I am the parent or legal guardian and have the right to waive these rights.

Permission is granted Ballet Arts and Conejo Civic Ballet Company to use photographs of students for publicity purposes.

I have read, understood and agree to be bound by the above statement (please print your name, sign & date):

Print Name:_____

_____   ◄

Signature of Parent or Guardian if under 18 years old   Date