# Samantha's Studio of Dance

# Registration 2022-2023

Student Name	Age	2 Ø	Birthday (	Dance Experience (years)
Parent/Guardian:				
Phone Number:		Call	Text	
Address:				
Email Address:				
Emergency Contac Contact Number: <u>-</u>			on: I	Emergency
Student Name	1 <sup>st</sup> Class	2 <sup>nd</sup> Class	3 <sup>rd</sup> Class	Tuition Total

Monthly Total: \_\_\_\_\_

## SAMANTHA'S STUDIO OF DANCE

### **RELEASE & AUTHORIZATION FORM**

I, \_\_\_\_\_\_ (parent/guardian) hereby grant permission for my son/daughter, \_\_\_\_\_\_ (dancer's name) to participate in the Samantha's Studio of Dance 2022-2023 season. I am

aware that this requires a commitment by the dancer to attend technique classes on a regular basis as well as all mandatory rehearsals at the dance studio. I also understand that by signing this form, I am agreeing to pay the balance of my child's tuition and recital costume(s).

#### **ASSUMPTION OF RISK**

I acknowledge that dancing is a physical activity that involves jumping, kicking, rotation, and coordinated body movements. I agree that my/my child's participation in Samantha's Studio of Dance involves physical risks and I agree to assume the full risk of any bodily injuries (including death), damages, or loss which I/ my child may sustain as a result of any activities arising out of, connected with, or in any way associated with my/my child's participation in Samantha's Studio of Dance activities. I certify that my/my child's present level of physical condition is consistent with the demands of active participation in dance.

#### WAIVER

I agree, that I, my heirs, next of kin, executors, administrators, and assigns do hereby fully release Samantha's Studio of Dance from any and all liability, claims, and causes of action arising from any injury, damage or loss I/my child may sustain as a result of my/their participation in Samantha's Studio of Dance activities and covenant not to sue Samantha's Studio of Dance for the same, whether caused by the negligence of Samantha's Studio of Dance or otherwise. **This is a complete and irrevocable release and waiver.** 

#### IMDEMNITY

I agree to indemnify, hold harmless, and defend Samantha's Studio of Dance from any and all claims arising out of or in consequence of my/my child's participation in Samantha's Studio of Dance. This indemnification includes, but is not limited to, legal fees.

#### MEDICAL INFORMATION AND AUTHORIZATION

I have disclosed all illnesses and conditions affecting my child to Samantha's Studio of Dance. In the case that my child sustains an injury or medical emergency during activities relating to Samantha's Studio of Dance and in the event that my child or myself cannot respond at the time of the emergency, I hereby authorize the staff at Samantha's Studio of Dance to seek, administer or have administered whatever first aid or emergency medial care is deemed necessary for my child's welfare. This authorization DOES NOT require a prior determination of a threat to my child's life or of serious permanent injury. I will take full financial responsibility for any medical treatment. I have custody of my child and the right to make decisions for him/her.

#### MODEL RELEASE AND AUTHORITY TO IDENTIFY

I acknowledge that my child or myself may be photographed or recorded for marketing or public relations purposes. I hereby grant Samantha's Studio of Dance permission to use photographs of my child or myself as elements of a photographic piece or to put the photographs to any legitimate uses they may deem proper.

#### I ACKNOWLEDGE MAKING THIS AGREEMENT

I have read and understood the terms and conditions of this agreement. I acknowledge that this agreement is the complete and exclusive stamen of the agreement between these parties, and supersedes all other understandings or agreements, verbal, or otherwise, between the parties. By signing I am agreeing to abide by the terms of this agreement.

Date:	
:	

I acknowledge that ...

I am committing to participate for the entire season starting September 2022 through April 2023.

I am committing to pay the monthly tuition regardless of missed classes.

My child will follow the dress code.

No gum or candy during class.

My child will work hard, listen to teachers, and have fun!

Parent Signature:

Student Signature (ages 10 and older):