

## ADULT DANCE CLASSES – STUDENT FORM

STUDENT NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMERGENCY CONTACT NAME: \_\_\_\_\_

EMERGENCY CONTACT PHONE NUMBER: \_\_\_\_\_

ARE THERE ANY HEALTH CONCERNS/ALLERGIES WE SHOULD BE AWARE OF?

\_\_\_\_\_  
\_\_\_\_\_

PLEASE CIRCLE ADULT CLASS THAT YOU WOULD LIKE TO REGISTER FOR, AND ATTACH CASH OR CHEQUE:

❖ ADULT BALLET	MONDAY 10:30-11:30AM, class runs Sept 28 to Dec 7 (No class Oct 12 <sup>th</sup> Thanksgiving)	\$157.50
❖ ADULT BALLET INTRO	TUESDAY 6:00-7:00PM, class runs Sept 29 to Dec 1	\$157.50
❖ ADULT BALLET PREV EXP	TUESDAY 8:15-9:30PM, class runs Sept 29 to Dec 1	\$178.50
❖ ADULT MODERN/CONTEMP.	WEDNESDAY 8:00-9:00PM, class runs Sept 30 to Dec 2	\$157.50
❖ ADULT TAP	THURSDAY 10:30-11:30AM, class runs Oct 1 to Dec 3	\$157.50

THE UNDERSIGNED, DO HEREBY AGREE THAT, AS A CONDITION OF USE OF THE FACILITIES OF DID (DEAS ISLAND DANCE), I DO HEREBY ASSUME ALL RISK OF PERSONAL INJURY, DEATH OR PROPERTY LOSS RESULTING FROM ANY CAUSE WHATSOEVER INCLUDING BUT NOT LIMITED TO THE INHERENT RISKS OF THEIR LANDLORDS OR LESSORS FROM ANY AND ALL CLAIMS THAT I MIGHT HAVE FOR PERSONAL INJURY, DEATH OR LOSS WHETHER BASED ON ALLEGATIONS OF NEGLIGENCE OR NOT. WAIVER MUST BE SIGNED ON BEHALF OF THE STUDENT BY HIS/HER PARENT OR GUARDIAN IF STUDENT IS UNDER 19 YEARS OF AGE.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_