Child/Teen Class Registration and Waiver

(Please use a separate form for each child.)

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_ Birth Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about PAIYH? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Best Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_

Emergency Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Child \_\_\_\_\_

Who else can pick up? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Allergies, meds, medical issues, or any special needs we should be aware of? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**MAKE-UP POLICY**

If you miss a class you can make it up with any other age/level-appropriate class on the schedule within four weeks.

**ACKNOWLEDGMENT OF POLICIES**

I have read and agree to follow the PAIYH Dance Studios polices. I agree to pay all fees that apply to my account, including late pickup fees, and returned check fees. I understand that to withdraw from a class and stop recurring payments I must submit a withdraw form by the 15th of the month prior to withdraw. I understand that PAIYH Dance Studios does not give refunds or credit for classes missed due to holidays, vacation, illness, or weather. **No refunds. No credits. No exceptions.**

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

Printed Name of Parent or Legal Guardian Signature of Parent or Legal Guardian Date

For Office Use Only

Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_ Day/Time \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pd \_\_\_ Reg \_\_\_ Roster \_\_\_ Recital \_\_\_ Trial \_\_\_ CC\_\_\_ SD \_\_\_

Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_ Day/Time \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pd \_\_\_ Reg \_\_\_ Roster \_\_\_ Recital \_\_\_ Trial \_\_\_ CC\_\_\_ SD \_\_\_

Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_ Day/Time \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pd \_\_\_ Reg \_\_\_ Roster \_\_\_ Recital \_\_\_ Trial \_\_\_ CC\_\_\_ SD \_\_\_

\*\*\*\***PLEASE TURN PAGE TO SIGN WAIVER\*\*\*\***

**LIABILITY WAIVER AND RELEASE (UNDER 18)**

I hereby give my consent for my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_’s (PRINT YOUR CHILD’S FULL NAME) participation in the activities at PAIYH Dance Studios. I understand that creative movement and play, dance and art are activities that have a risk of accident or injury. I acknowledge and understand the nature of the activities my child will be participating in, and that my child is in proper physical condition and capable of participating in the related activities. I also understand that PAIYH is not in any way responsible for making for making any determination about my child’s fitness or ability to participate in these activities.

In consideration of my child’s enrollment or participation in any dance program or other activities, I agree on behalf of myself and my child, to release and hold harmless BA DANCE LLC, it’s owners, instructors, employees, contractors, landlords and any other student(s) (the “Released Parties”), in connection with any instruction or other activities for any injury or damages, foreseen or unforeseen, sustained by my child while he or she is enrolled or participating in, or arising out of any such program or activity. I assume all risks to my child in connection with any instruction or activity and will not hold the Released Parties liable for any injuries or damages that may be incurred. I further agree to indemnify and hold harmless the Released Parties from liability, costs and fees, for the injury or death of any person(s) and damage to property that may result from my or my child’s negligent or intentional act or omission while participating in or arising out of any PAIYH activity or program.

I also acknowledge that the Release Parties are not responsible for personal property, lost, damaged or stolen while I or my child are on PAIYH property or at any time related to participation in any class or activity.

Additionally, I agree to report, as soon as practical, to PAIYH any injury, damage, theft or other similar issue at the time I experience or learn of such matter.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FRO MY OR MY CHILD’S INJURY OR DEATH, OR DAMAGE TO MY AND MY CHILD’S PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE DESCRIBED ACTIVITIES AND IT OBLIGATES MY TO INDEMNIFY THE RELEASED PARTIES FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY MY OR MY CHILD’S NEGLIGENT OR INTENTIONAL ACT OR OMISSION.

I understand that I have given up substantial rights by signing it. I have intentionally signed this agreement freely, voluntarily, under no duress without inducement.

I authorize BA DANCE, LLC to use photos taken of me or my child while at dance or dance functions for marketing and promotional materials, including web site. I acknowledge that my child may be videotaped for educational and performance purposes only, including but not limited to recital(s).

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

Printed Name of Parent or Legal Guardian Signature of Parent or Legal Guardian Date

**www.PutArtInYourHeart.com 512-291-2179**