

Center for Performing Arts Dance Studio and Acting School

Student Registration Sheet 2014-2015

Student's First, Middle & Last Name: _____ Student's Gender: Male ___ Female ___

Student's Age: _____ Student's Date of Birth: _____ Student's Cell Number: _____

Student's Street Address: _____

Student's City, State & Zip: _____

*E-mail Address: _____

Student's E-mail: _____

Mother's Name: _____ Mother's Cell: _____ Home Phone: _____

Father's Name: _____ Father's Cell: _____ Home Phone: _____

Emergency Contact (other than Parent/Guardian): _____

Emergency Contact's Phone Number: _____ Relationship to Student: _____

New Students: How did you find out about us? _____ Referral Given To: _____

List the student's physical limitations or allergies: _____

Is the student covered by medical insurance? _____

Including the 2015 recital, how many recitals has the student participated in at CPAM? _____

I acknowledge that the Center for Performing Arts Dance Studio and Acting School and its instructors are not liable for any injuries that may occur while any student or family member is on the premises. Nor are they liable for any lost or stolen property. I have read the CPAM handbook and agree to follow all of the policies, regulations, and terms of payment.

Signature: _____

Class Day	Class Name	Class Level	Class Time	Length of Class	Total Hours
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____

***TUITION MUST BE UP TO DATE IN ORDER FOR THE FAMILY TO PARTICIPATE IN ANY CLASSES. Total Family Hours: _____**

Early Tuition: \$ _____ Regular Tuition: \$ _____ 10% Late Fee (Add on 15th of each month delinquent): \$ _____

Each dance class requires a recital costume of which a deposit of \$45 must be paid by October 15th. The balance must be paid by November 15th in order to continue with classes. Students registering between November 15th and January 15th are responsible for additional shipping & handling charges of \$15 for each costume upon registration. Total Number of Costumes: _____ x \$45 = \$ _____

September October November December January February March April May June

Center for Performing Arts Dance Studio and Acting School

Student Registration Sheet 2014-2015

PLEASE READ CAREFULLY BEFORE SIGNING!!

In consideration of being permitted to participate in any way in the Center for Performing Arts Dance Studio and Acting School and/or being permitted to enter for any purpose to any restricted area (here in defined as any area where in admittance to the general public is prohibited), the parent(s) and/or legal guardian(s) of the minor participant named below agree:

1. The parent(s) and /or legal guardian(s) will instruct the minor participant that prior to participating in the below dance and/or acting activities or events, he or she should inspect the facilities and equipment to be used. If he or she believes anything is unsafe, the participant should immediately advise the officials of such condition and refuse to participate. I understand and agree that if at any time, I feel anything is UNSAFE; I will immediately take all precautions to avoid the unsafe area and REFUSE FURTHER PARTICIPATION.

2. I/WE fully understand and acknowledge that:

(a) There are risks and dangers associated with participation in dance and/or acting events and activities, which could result in bodily injury, partial and/or total disability, paralysis, and death.

(b) The social and economic losses and/or damages, which could result from these risks and dangers described above could be severe.

(c) These risks and dangers may be caused by the action, inaction, or negligence of the participant or the action, inaction, or negligence of others including, but not limited to, the Releases named below.

(d) There may be other risks not known to us or are not reasonably foreseeable at this time.

3. I/WE accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis, or death, however caused and whether caused in whole or in part by the negligence of the Releasees named below.

4. I/WE HEREBY RELEASE, WAIVE DISCHARGE AND COVENANT NOT TO SUE the dance/acting facility used by the participant including its owners, managers, promoters, lessees of premises used to conduct the dance/acting event or program, premises and event inspectors, underwriters, consultants and others who give recommendations, directions, or instructions to engage in risk evaluation or loss control of activities regarding the dance/facility or events held at such facility and each of them, their directors, officers, agents, employees, all for the purposes herein referred to as "Releasee"....FROM ALL LIABILITY TO THE UNDERSIGNED, my/our personal representatives, assigns, executors, heirs and next to kin FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES OR DAMAGES AND ANY CLAIMS OR DEMANDS THEREFORE ON ACCOUNT OF ANY INJURY, INCLUDING BUT NOT LIMITED TO THE DEATH OF THE PARTICIPANT OR DAMAGE TO PROPERTY, ARISING OUT OF OR RELATING TO THE EVENT(S) CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEE OR OTHERWISE.

5. I/WE HEREBY acknowledge that THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of THE UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.

6. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the Province or State in which the event is conducted and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.

7. On behalf of the participant and individually, the undersigned partner(s) and/or legal guardian(s) for the minor participant executes this Waiver and Release. If, despite this release, the participant makes a claim against any of the Releasees the parent(s) and /or legal guardian(s) will reimburse the Releasee for any money which they have paid to the participant, or on his behalf, and hold them harmless.

8. Parents are responsible for their own children before and after classes. The parents acknowledge that the facility does not provide child care before or after classes and that the parents or legal guardian is responsible to drop off and pick up on time or remain at the facility.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Dance/Acting School: _____ Center For Performing Arts Dance Studio and Acting School _____

Mother's Signature (if under 18): _____

Father's Signature (if under 18): _____

Alternate Parent or Guardian (if under 18): _____

Participant Signature (Age 18 & Over): _____

Name of Participant (please print): _____

Received By (Initials of Office Staff): _____ Date: _____