



2018 Summer Registration

Student Name _____ Date of Birth _____

Parents / Guardian _____

Mailing Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Cell Phone _____ Cell Phone _____

Primary Email _____

Additional Emails _____

Emergency Contact (other than parents) _____

Emergency Contact Phone _____ Relationship to Student _____

Allergies _____

Student carries an EpiPen _____ yes _____ no If yes, location of EpiPen _____

In order to help us provide a quality educational experience, please list any learning differences the student may have, and strategies that work well to assist the student.

Summer Camps:

_____ Magical Dance Adventure (ages 4-7) June 18-22 **\$85**

_____ Magical Dance Adventure (ages 7-10) June 18-22 **\$85**

_____ Fairy Tale Follies Drama (K-2nd) June 25-29 **\$85**

_____ Creative Cartoon Chronicles (3rd-5th) June 25-29 **\$85**

Summer Classes (Tuesday/Thursday July 17,19,24,26):

_____ Preschool Dance and Tumble (ages 3-5) **\$45**

_____ Ballet / Tap (ages 5-10) **\$45**

_____ Acrobatics (ages 5-10) **\$45**

_____ Jazz (ages 5-10) **\$45**

Summer Intensives (July 9-13):

_____ Petite Level Classes (ages 8-11) **\$175**

_____ Junior / Senior Level Classes (ages 12 & up) **\$265**

End of Summer Boor Camps (Tuesday/Thursday Aug. 7,9,14,16)

_____ Intermediate Acrobatics **\$45**

_____ Intermediate Technique **\$50**

_____ Advanced Acrobatics **\$50**

_____ Intermediate / Advanced Technique **\$50**

_____ **Summer Fee Total**

(_____) **10% Discount for multiple class enrollment**

_____ **TOTAL FEES DUE PAID** _____

Forms may be returned my mail to: Studio J Dance Center 129 E. Taft Ave. Asheboro, NC 27203

Studio J Dance Center

Waiver and Release of Liability

IN COSIDERATION OF _____ being allowed to participate as a student of Studio J Dance Center, I / My child(ren) agree that:

I understand the nature of dance and drama classes and acknowledge that I/my child(ren) am/are qualified to participate in such activity. I acknowledge that I have medical insurance for the benefit of myself / my child(ren) and will provide proof of such insurance upon request. Such insurance will be the primary source of payment should medical treatment be necessary. I have discussed any medical, physical, and emotional limitations that I/my children have with a representative of Studio J Dance Center, and affirm that I / my child(ren) is not bound by any other medical and/or physical limitations and that I/they are medically cleared to participate at 100% capacity, without restriction, and therefore, I fully accept all risks and responsibilities for losses, costs, and damages as a result of normal activity engaged therein.

I agree that I/my child(ren) will abide by all regulatios set forth in the "Student Handbook". The "Student Handbook" will be given to me/my child(ren) and any amendments thereto will be furnished to me/my child(ren) promptly. Studio J Dance Center reserves the right to change the terms of the "Student Handbook" at anytime. Changes to the "Student Handbook" will be provided to me/my child(ren). I agree that Studio J Dance Center has the right to revoke my/my child(ren) enrollment and therefore their eligibility to participate in any activity in the event of any violation of the "Student Handbook". I/my child(ren) agree that Studio J Dance Center or any of its representatives will not be held responsible for any item, left, lost, broken, or stolen while in the studio.

I/my child(ren) hereby release, discharge, covenant, not to sue and agree not to hold harmless Studio J Dance Center, its representatives, administrators, members, directors, agents, volunteers and employees, other participants, and sponsors, advertisers and if applicable, owner, and lessor of the premises on which the activity takes place (each considered one of the releases herin) from all liability, claims, demands, losses, or damages caused by other than willful intentional, or grossly negligent acts thereof, and further agree that if, despite this release, I or anyone on my behalf makes a claim against any of the releases named above, I will indemnify, save and hold harmless each of the releasees from any litigation expenses, attorneys fees, loss liability, damage or cost that they may incur as a result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTANT AND AGREE TO ITS TERMS AND CONDITIONS. I INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ANY AND ALL LIABILITY. I AGREE THAT IF ANY PORTION IS DEEMED TO BE INVALID, THE REMAINDER SHALL CONTINUE IN FULL FORCE AND EFFECT.

Dated _____

Signature of, if under 18 signature of minor's parent and/or legal guardian

Print or type full name

_____ I give permission for my/my child(ren)'s likeness to be used in Studio J Dance Center promotional material and understand that there will be no compensation for such use.

_____ I DO NOT give permission for my/my child(ren)'s likeness to be used in Studio J Dance Center promotional material and understand that there will be no compensation for such use.