

**Winter & Spring Program 2019
Registration Form**



Student Name: _____

Street Address _____ Town _____ Zip _____

Email: _____

Complete this box if student is under 18 years old: Age by first day of session: _____ Birthdate: _____ / _____ / _____

Parent #1 Name _____ Home Phone # _____ Cell # _____

Parent #2 Name _____ Home Phone # _____ Cell # _____

Emergency Contact: _____ Phone # _____ Relation _____
(other than above info)

Complete this box if student is age 18+: Home phone # _____ Cell # _____

Emergency Contact: _____ Phone # _____ Relation _____
(other than above info)

List any Medical Conditions: _____

Check Session(s): Session 1 begins January 26 Session 2 begins March 9 Session 3 begins April 27(closed 5/25)

Check Class: Mommy/Me ages 2-3 Wednesday 9:45am Ballet/Jazz/Tap ages 3-5 Saturday 9:00am
 Gymnastics ages 3-5 Wednesday 11:30am Ready, Stretch, Grow ages 1-2 Saturday 10:00am
 Ballet/Jazz/Tap ages 3-5 Thursday 10:30am Ready, Stretch, Grow age 2-3 Saturday 10:45am
 Adult Classes Thursday 8:15pm Gymnastics ages ages 6-12 Saturday 12:15pm
 Hip Hop ages 6-12 Friday 7:15pm (session 1 only) CheerDance ages 6-12 Saturday 1:30pm

Studio(s) attended: _____

How did you hear about All That Jazz Dance Studio?: _____

Can All That Jazz use a photo of student for advertisement purposes? Yes No

A credit will not be issued for any missed classes. No refunds once a session begins. Missed classes can be made up within the same session. There will be a \$25 fee for any returned checks.

WAIVER OF LIABILITY

This agreement releases All That Jazz Dance Studio, LLC from all liability related to injuries that may occur on premises or during a performance. By signing this agreement, I agree to hold All That Jazz free from all liability including financial injuries incurred regardless of whether said injuries are caused by negligence. I also acknowledge the risks involved in dancing, cheer and gymnastics. I am participating voluntarily and all risks have been made clear to me. I agree that there are no pre-existing conditions that will increase my likelihood of experiencing injuries while engaging in these activities.

I have read the terms above and understand them. I further understand that signing this release, I voluntarily surrender certain legal rights.

Signature (Parent/Guardian if under 18 years of age)