



STUDENT REGISTRATION FORM
WAIVER AND RELEASE (LOCATED ON BACK)

DATE

STUDENT NAME Birthday

STUDENT NAME Birthday

STUDENT NAME Birthday

PARENT / GUARDIAN NAME

PHONE: MOBILE EMERGENCY #

MAILING ADDRESS:

Please check here if we may email news and updates to you in lieu of hard copies. Help us save paper!

EMAIL: We respect your privacy. All information given to ISSAQUAH DANCE THEATRE will be used for the sole purpose of informing you of class scheduling, recital information, tuition balances and studio updates.

Is there anything else we should know about this new student? ie: medical conditions, etc.

PREVIOUS DANCE TRAINING if 7 years of age or older:

How did you hear about ISSAQUAH DANCE THEATRE? (Please check all that apply)

Drive By Internet Yellow Pages Newspaper Friend (their name here) Magazine Other (please describe)

Please initial the following:

By initialing this paragraph, I state that I AGREE and will comply with all policies provided in the ISSAQUAH DANCE THEATRE student handbook. I understand that there are NO refunds or prorates for sessions paid in advance. If I am enrolled in monthly auto pay, I may withdraw from classes if I provide a 30 day written notice by the 1st of any given month. I understand that all makeup classes require both a 24 hour notice of absence and 24 hrs advance notice to schedule a makeup class.

Assumption of Risk

If you are under 18 years of age, your parent or legal guardian's signature is required.

By signing below, I agree to the following waiver and release. I understand that by being a participant in **ISSAQUAH DANCE THEATRE** school activities that:

- A. I will have the opportunity to participate in various activities, including dance classes, workshops, rehearsals and performances held at ISSAQUAH DANCE THEATRE. I will receive information and instruction about dance and other related activities. I understand that by participating in any of these activities that I may be subjected to a variety of hazards and risks, foreseen and unforeseen, which may cause me to suffer property damage, injury or death ("DAMAGES"). I know that these DAMAGES can occur due to natural causes, the active or passive negligence of ISSAQUAH DANCE THEATRE, or the negligent or intentional acts of third parties and or fellow participants. I understand that I should therefore exercise extra care for my own person. I choose to participate in ISSAQUAH DANCE THEATRE School activities agree to pay the required costs therefore, and voluntarily assume the risks of such DAMAGES occurring while I am participating in ISSAQUAH DANCE THEATRE school activities.
- B. ISSAQUAH DANCE THEATRE may at times deliver participants to various third parties who are not ISSAQUAH DANCE THEATRE employees, who will conduct, supervise, guide or instruct participants in various activities. ISSAQUAH DANCE THEATRE assumes no duty to certify, monitor or verify the qualifications of any third parties involved in these activities. Participant's concerns regarding the qualifications of any third parties conducting those activities should be directed to the third parties. Participant agrees to release, indemnify and hold harmless ISSAQUAH DANCE THEATRE for the liability for DAMAGES arising out of negligence of such third parties.
- C. I recognize that dance and all related activities require intense physical exertion that may be strenuous and may cause physical injury and therefore involve unique risks of DAMAGES, and I am fully aware of the risks and hazards involved. I understand the nature of Marley floors, mobile floor barres and other dance equipment, and the consequences of wearing ballet slippers, pointe shoes, socks or bare feet and other related dance footwear, and I accept full responsibility for my own choice of footwear. I am satisfied with the condition of ISSAQUAH DANCE THEATRE facilities and hereby assume all the risks inherent in the activities there. I voluntarily assume the risks of any and all damages I may incur at ISSAQUAH DANCE THEATRE, unless such DAMAGES are directly related to the negligent operation of the facilities by ISSAQUAH DANCE THEATRE.

RELEASE AND WAIVER OF LIABILITY

In consideration of being accepted by ISSAQUAH DANCE THEATRE to participate in any activity, I hereby agree to hold ISSAQUAH DANCE THEATRE, its employees, agents, contractors or owners, harmless from any and all liability, action, causes of action, debts, claims and demands of every kind and nature whatsoever which I now have or which may arise from or in connection with my ISSAQUAH DANCE THEATRE school activity. The terms of this agreement shall also serve as release and assumption of risk from any heirs, executors and administrators for all members of my family.

I further agree that this RELEASE and ASSUMPTION OF RISK agreement and WAIVER OF LIABILITY is intended to be as broad as permitted under law, and that if any portion thereof is held invalid, it is agreed that all other portions shall continue in full legal force and effect.

I have read and understood the above agreement and voluntarily agree to sign this document.

If the participant is a minor, this document is to be signed by the minor's legal guardian. By signing below the minor's legal guardian indicates that he or she understands the "I" refers to both him or her and the minor.

SIGNATURE

DATE

PRINTED NAME