

2019 Summer Registration Form

Student's Name _____ Date _____
 Birth date _____ Age _____ Email Address _____
 Parent's Name(s) _____
 Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Cell _____
 Emergency Contact _____ Phone _____

Camp Name	Level	Level	Week 1	Week 2	Week 3	Pricing
Imagine	2-3	3-5	July 15th	July 22nd		
Jump Ahead	5-8 & Petites	8-12	July 15th	July 22nd		
Youth Intensive	Jr. Perf Team	Mini	July 15th	July 22nd		
Afternoon Intensive	Intermediate	Advanced	June 19th	July 15th	August 14th	
Dance Party	Toy Story	July 20th	10 – 12			\$40
Dance Party	Greatest Show	July 21 st	12 -- 3			\$50

*****The following must be signed in order for student to attend any class or performance*****

In attending Inspire School of Dance, taking dance classes and otherwise using the facilities and equipment therein, I do so at my own risk. Inspire shall not be liable for any damages arising from personal injuries incurred by me in, on, or about the premises of Inspire School of Dance relative to my attendance at the dance school, taking dance classes or otherwise using the facilities and equipment therein. I assume full responsibility for any injuries or damages which may occur to me in, on, or about the premises of the Inspire School of Dance, and I do hereby fully and forever release and discharge Inspire, its shareholders, directors, officers, dance instructors, employees, and agents from any and all claims, demands, damages, rights of action or causes of action, present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of my use of said Inspire School of Dance, dance classes, facilities, and equipment thereof.

In addition, I understand that correct physical placement and body alignment are necessary in order for all dance movement to be properly executed. I understand and agree that the instructors will be touching my child within a class setting for correction purposes. Finally, I give Inspire School of Dance my permission for the use of any printed photographic and/or video recordings of the above named student to be used in any promotional and/or fundraising materials. With this release I also understand that we will not receive any compensation for the use of said materials.

I understand that any and all tuition paid is non-refundable to me in any way, shape, or form. I also understand that any summer tuition paid may not be credited toward any other classes or session. In addition, any classes missed during summer may not be made up.

I hereby acknowledge that I have read and agree with the above information as it pertains to the student listed above.

Signature of parent or legal guardian _____

Print Name _____ Date _____

Student's Signature _____ Date _____

Please list any allergies that your child may have on the back of this form