

Dance Studio Enrollment Consent and Waiver Form

Please print and complete this form in full. This document must be signed and returned to the studio prior to the student's first class participation.

1. Student Information

Student First Name: Student Last Name:
Date of Birth (MM/DD/YYYY): Age:
Street Address:
City: State / Zip:

2. Parent / Guardian Information (If Student is Under 18)

Parent/Guardian Name:
Primary Phone Number: Email Address:

3. Emergency Contact

Emergency Contact Name:
Relationship to Student:
Emergency Phone Number:

4. Medical Information

Please list any medical conditions, physical limitations, or severe allergies the instructors should be aware of:

Medical Conditions / Allergies:

5. Liability Waiver & Release Consent

By signing below, I acknowledge and agree to the following terms and conditions:

- **Assumption of Risk:** I understand that dance training and the physical exercises associated with it involve risk of physical injury. I voluntarily assume all risks associated with participation in classes, rehearsals, performances, and studio events.
- **Liability Release:** I agree to release and hold harmless the Dance Studio, its owners, instructors, employees, and facilities from any and all liability, claims, demands, and causes of action arising out of any property damage, physical injury, or illness that may occur while participating in studio activities.
- **Medical Treatment Consent:** In the event of an emergency, I authorize the Dance Studio staff to obtain necessary medical treatment for the student if the parent/guardian or emergency contact cannot be reached.
- **Photo and Video Release:** I consent to the use of photographs or video recordings of the student taken during studio activities for promotional, marketing, or educational purposes. (If you do not consent, please write "NO PHOTO" in the text box below).

Photo Release Exceptions (if any):

6. Acknowledgment and Signature

I have read, understood, and agree to the terms of this Consent and Waiver Form. (If student is under 18, a parent or legal guardian must sign).

Printed Name of Signee:
Relationship to Student (e.g., Self, Parent, Guardian):
Signature (Write or sign after printing):
Date signed (MM/DD/YYYY):