



14950 Greyhound Ct., Suite #4
Carmel IN 46032
317-581-2423

Registration Form

Please submit this form along with your annual registration fee

Registration Date: _____

Student's Name: _____

Parent's Name: _____

Address: _____

City: _____

Zip Code: _____

Contact Email: _____

Home phone: _____ Cell phone: _____

Date of Birth: _____ Age: _____ Grade: _____

Existing injuries/medical conditions: _____

Emergency Contact (other than parent) _____

How did you find out about us? _____

The undersigned hereby gives Central Indiana Academy of Dance, its legal representatives, successors and assigns and all persons acting with its permission to take, copyright, use and publish photographs and/or video of or concerning the undersigned for any purpose Central Indiana Academy of Dance deems desirable. The undersigned accordingly releases, discharges and agrees to hold harmless Central Indiana Academy of Dance and all persons acting with its permission or upon its authority or for who it is acting, from any liability for or arising out of taking, copywriting, using and publishing photographs and/or video of the undersigned for any purpose Central Indiana Academy of Dance deems desirable.

Signed (parent or guardian):

Annual Registration Fee of \$35 (\$40 per family) is due upon registration.

Release of Liability

Central Indiana Academy of Dance, Inc.

Central Indiana Academy of Dance, Inc.

HOLD HARMLESS AGREEMENT AND ASSUMPTION OF ALL RISKS

I, the undersigned, by acknowledgement and complete agreement below, hereby declare both personally and/or as parent and/or legal guardian of the child that is or may be less than 18 years of age (either party hereafter referred to as I and/or We) the following:

So that I and/or We can enjoy activities for which I may not be skilled I and/or We are informed that there is some inherent unavoidable risks, known and unknown, that may cause harm, loss, personal injury and in the most extreme cases even potentially death, in participating in any course of physical activity. Some risks cannot be avoided without destroying the unique character of these activities and can also be the cause of loss or damage to others, equipment and/or others personal property. Certain risks are indigenous to physical contract sports that involve any form of dance and any other activity that student, client or spectator willfully engages in relation to or in affiliation with Central Indiana Academy of Dance, Inc.

I and/or we expressly agree that I and/or we fully assume 100% complete and full responsibility for all risks described above and/or any of other known or unknown. And hereby hold harmless and release 100% of all and any liability and discharge Central Indiana Academy of Dance, Inc., and/or each and every student, client, owner, operator, officer, partner, contractor, teacher, employee, agent, representative, and/or assessors or assigns from any and all manners of action or actions, lawsuits, debts, liens, contracts, agreements, promises, insinuations, liabilities, claims, rights, obligations, negligence, damages, loses and expenses of any nature whatsoever, know and unknown for which I and/or we have may ever hereafter against each and/or every of the above reference persons and/or entities by reason of use of any of the facilities, participating in any course of exercise, and/or any affiliation whatsoever with all the above.

I and/or We represent that student is in good physical and/or mental condition and that He/She has no impairments, ailments, disabilities or special circumstances to prevent them from undertaking any activity. And that if I and/or We have or become aware of a medical history, disorder, condition, concern, or any other doubt regarding any physical or mental issue that I and/or We should seek the consultation and/or examination of a Professional licensed physician before engaging in any and all activity or affiliation.

Furthermore, none of the parties above can unfortunately be held responsible, accountable, or liable for any and all personal property or public property in care of the undersigned. This includes but is not limited to damage, theft, or destruction of the same thereof and that I and/or We assume 100% all responsibility and risks or such property.

I and/or We finally acknowledge carefully reading, completely understanding, and agreeing 100% with the entire document releasing and discharging all and any future claims known and unknown expressly waiving any rights I may have against any of the above. I and/or We fully realize and understand that this is a binding legal document which completely eliminates any claims and effects any rights I may have with any affiliation specifically with Central Indiana Academy of Dance, Inc. all above, successors and/or assigns.

Undersigned: _____ Date: _____

Name Printed: _____

Student's Name: _____

By Signing below, I agree that I have been made aware of the following policies.

- Tuition is paid in advance by the session or in monthly installments that are due no later than the 15th of the month. Accounts paid after the 15th of the month will be charged a \$15 late fee.
- If your dancer would like to withdraw prior to the end of the spring session, two weeks notice must be given by submitting a Class Drop Form to close the account.
- Make-up classes may be scheduled at the studio desk within two weeks of the missed class. Each student is permitted 3 make-up classes per semester and there is no carry-over or make-ups between the semesters.
- Dancers are expected to dress according to the Academy Dress Code. For female dancers in levels 1-8, this includes securing the hair in a bun.
- Dancers should not be dropped off (without supervision) more than 20 minutes prior to their class
- Students should be picked up promptly following class or rehearsal. The studio will close promptly 5 minutes after the end of the last class. After 2 instances of late pick-up, your account will be billed \$1.00 per minute.

Parent's Signature: _____ Date: _____