



DANCE REGISTRATION FORM

PARTICIPANT'S NAME: _____ AGE ____ M ____ F ____

Parent/Guardian Name (if under 18): _____

Street Address: _____ City _____ Zip: _____

Email: _____ Cell# _____

Work/House# _____

Emergency Contact Name: _____

Phone Number: _____

STANDARD RELEASE

DANCE WITH ME PRODUCTIONS TAKES EVERY PRECAUTION TO ENSURE THE SAFE, HEALTHY, AND INJURY-FREE LEARNING ENVIRONMENT. HOWEVER, AS DANCE IS A PHYSICAL ACTIVITY REQUIRING BODY MOVEMENT, IT IS IMPOSSIBLE TO GUARANTEE COMPLETE FREEDOM FROM INJURY. I HEREBY RELEASE DANCE WITH ME PRODUCTIONS EMPLOYEES, ASSOCIATED AGENCIES, MANAGEMENT AND STAFF FROM ANY AND ALL CLAIMS ARISING FROM DAMAGES OR INJURIES WHICH MYSELF OR MY CHILD MAY SUSTAIN WHILE TRAVELING TO OR FROM, OR WHILE PARTICIPATING IN DANCE ACTIVITY.

CHILD'S NAME _____ DATE _____

PARENT'S NAME _____

PARENT'S SIGNATURE _____

MINOR PHOTO RELEASE

I GIVE DANCE WITH ME PRODUCTIONS PERMISSION TO PUBLISH IN PRINT, ELECTRONIC, OR VIDEO FORMAT THE LIKENESS OR IMAGE OF MY CHILD. I RELEASE ALL CLAIMS AGAINST DANCE WITH ME PRODUCTIONS WITH THE RESPECT TO COPYRIGHT OWNERSHIP AND PUBLICATION INCLUDING ANY CLAIM FOR COMPENSATION RELATED TO USE OF THE MATERIALS.

CHILD'S NAME _____ DATE _____

PARENT'S NAME _____

PARENT'S SIGNATURE _____