

MADDOX DANCE STUDIO REGISTRATION FORM **24/25**

Students Name _____

Date of Birth_____ current age_____

Grade in school_____

School attending_____ release time_____

Mailing address_____

City_____ State_____ zip code_____

Home phone_____ cell phone_____

2nd phone_____

Mother's Name_____ cell_____

Father's name_____ cell_____

Name of responsible party_____

Auto=pay information_____ card type_____

Card Number _____

Expiration Date _____ CVC _____

If parents address is different, please indicate_____

E-mail address_____

Important for communication, please keep current

Please advise us on any medical concerns_____

AGREEMENT FOR PARTICIPATION :

Release and Waiver of Liability and Indemnity Agreement

I understand that dance, acrobatics, classes may include dancing with or without mats, with props, barre work, across the floor combinations, dance routines in the center, and other related activities. I understand that the activities of the program may involve some degree of strain or possible bodily or personal injury. I further understand that the spotting and aligning of the body in class may require the instructor to physically touch the student's torso, feet, arms, hands and legs. Maddox Dance Studio is not responsible for personal property.

In consideration of participation in the program, I hereby freely and expressly assume and accept any responsibility arising from participation in the program. I hereby release Maddox Dance Studio, its owners, agents, employees from any and all liability which may occur during or arising out of participation in the program. I further agree to waive any claims or cause of action that I may have, and to indemnify and hold Maddox Dance Studio, its owners, agent, and employees, harmless from and against any and all claims, demands, causes of action, losses, damages, expenses related in any way directly or indirectly, to my child's participation in the program.

I have read the Parent/Student Handbook and agree to adhere to all the content stated therein including:

- Studio Policies
- Tuition and Payments
- Dress Code
- Traffic pattern
- * Observation policy
- * Class Schedules
- * Calendar

I (we) agree to be responsible for reading studio correspondence, emails and respecting deadlines, if applicable

I(we) hereby acknowledge we have read the statements above and agree to participate accordingly.

Date _____ Signature _____
Signature _____

PLEASE LIST CLASSES YOU ARE INTERESTED IN:

Discipline _____	Day Time _____
Discipline _____	Day Time _____
Discipline _____	Day Time _____
Discipline _____	Day Time _____
Discipline _____	Day Time _____
Discipline _____	Day Time _____

Any additional list here _____

Tuition and non-refundable registration fee Due _____

Registration fee \$60.00 for family

Reg fee _____
Total Paid _____
