

## CAMP REGISTRATION FORM

## Please Print in **BLOCK LETTERS**

Student's Name		DOB	B/	/
MaleFemale	Camp Attending_		month da	y year
Gaurdian's Name			_	
Address				_
City		_Zip Code		
Phone(h)	(w)		_(c)	
Email				
Emergency Contact	Relationship			
Emergency Phone #s				
		D		
Signature		Dat	e	
For office use only				
Actual start date	class	day	time_	
Tuition:	received(date)	billed o	late	

## Release from Liability & Waiver of Claims Van der Zwaan Dance Studio

## www.zwaandance.com

By signing this release, Waiver & Assumption of Risk, (the "Release") I agree that Van der Zwaan Studio shall not be responsible for any injury suffered by the student ("student"). The Release extends to Van der Zwaan Studio, its owner, instructors, employees and locations of classes (all of which are collectively referred to herein as "studio"). The Release extends to every claim, demand or liability of any kind based on any injury or damage described below.

I understand that dance and tumbling activities as conducted and taught at the studio have inherent risks of injury. These risks include muscle pain and pulls, broken bones, ankle injuries and other personal injury. I recognize that the student is exposing himself/herself to such risks when undertaking dance and tumbling activities. I understand that these risks cannot be fully eliminated without jeopardizing the essential qualities of the activity. The student and I assume and accept all risks of injury or damage resulting from such dance and tumbling activities. The student's participation in this activity is purely voluntary, and the student elects to participate, and I join in that election, in spite of the risks.

I also agree that the studio, including its owner, instructors, employees and locations of classes, is not responsible for any property loss or damage suffered by the student or any guests or parents of the student that results upon entry into or presence in the studio or its surrounding property. I understand the terms of this Release and have had the opportunity to consider and discuss it with such individuals and advisors as I deem appropriate. By signing and dating this Release, I confirm that I have read the Release in full, that I understand its terms, and that I agree with those terms. I further confirm that by signing this Release, I acknowledge that if the student is hurt during participation in this activity, I may be found by a court of law to have waived my right and any right of the student to maintain a lawsuit against the studio on the basis of any claim which is released hereby. In consideration of the student's being permitted by the studio to participate in the activities provided by the studio, I further agree to hold harmless and indemnify the studio from any and all claims which are brought by or on behalf of any student who is a minor and which are in any way connected with the activities performed at the studio by any such minor student.

Date:	Student's Name:			
Parent's Signature:		_		
Print Name:				

Thank you for registering with Van der Zwaan Studio