

Dancer's Name: _____
DOB: _____
Parent's Name (please print): _____
Emergency Contact: _____
Phone: _____
Any Health or Physical Restrictions: _____
Food Allergies: _____

Waivers:

I agree to hold harmless P & P Dance Enterprises, LLC, dba In Step Dance Studio, its members, employees, agents, subcontractors, and volunteers from any and all claims for an injury, physical or emotional, that I , or my child may sustain in connection with their participation in class.

Photo Waiver:

I hereby authorize In Step Dance Studio to use photographs from dance rehearsals and/or performances that include me or my child. These photographs may be used for promotional materials and/or posted on the school's website and/or Facebook page. I understand that his/her name will not be used with any such picture.

Yes _____ No _____ (please initial)

Student Signature (18+) _____
Parent/Legal Guardian _____
Today's Date _____

Policy Acknowledgement:

By signing below, you agree that you have read and understand all of In Step Dance Studio's policies as written in the Studio Handbook and posted on our website, www.instepdancect.com. If a hard copy of the handbook is desired, it will be available upon request.

Signature: _____
Today's Date: _____