



STUDENT REGISTRATION FORM

Parent/Guardian name _____

Student name _____

Student birthday _____

Student food allergies _____

Phone: Cell _____ Home _____ Work _____

E-mail _____

Emergency Contact _____ Phone _____

_____ Phone _____

Mariya Vysotskaya

Cell: 804.385.8204

Email: dance_for_life86@live.com

maria@dancingclassroomsgrva.org



WAIVER OF LIABILITY

I, _____ (PRINT YOUR NAME) have chosen to have my child, _____ (PRINT CHILD'S NAME), participate in dance instruction given by Mariya Vysotskaya. I acknowledge that I understand the nature of the activities my child will be participating in and that my child is in the proper physical condition and capable of participating in the related activities, understanding that Mariya Vysotskaya is not in any way responsible for making such a determination.

In consideration of my child's enrollment in any dance instruction program, I understand and agree on behalf of myself and my child, to release, hold harmless, and discharge Mariya Vysotskaya from all claims, costs, liabilities, expenses or judgments, including attorneys' fees and court costs for any occurrences in connection with any dance instruction. I assume all risks to my child in connection with any instruction and further release Mariya Vysotskaya from liability for any injury sustained by my child while he or she is enrolled in any dance instruction program, including all risks reasonably connected with such activity whether foreseen or unforeseen.

I understand that Mariya Vysotskaya is not responsible for my child or other children under my supervision who are left unsupervised in the common areas and areas surrounding the dance instruction area and that Mariya Vysotskaya will only be supervising my child when he or she is participating in scheduled dance activities or instruction.

I understand that Mariya Vysotskaya is not responsible for personal property that is lost, damaged or stolen while I or my child is in the dance instruction area.

I acknowledge and agree that it is my responsibility to maintain my own accident and health insurance coverage that provides adequate coverage for my child participating in DanceSport classes and that Mariya Vysotskaya does not provide accident or health insurance for those participating in DanceSport classes.

My signature is proof of my intention to execute a complete and unconditional waiver and release of all liability pursuant to the terms herein, and agreement as to all terms and conditions contained above. I am of lawful age and competent to sign this affirmation.

I HAVE FULLY INFORMED MYSELF AS TO THE CONTENTS OF THIS RELEASE AND HAVE READ THE SAME PRIOR TO SIGNING.

Signature of Participant's Parent or Guardian

Date