

Shely Pack Dancers Registration Form 2011

Parent Name (Billing Name) _____

Address _____

City _____ Zip Code _____

Home Phone _____ Cell _____

Email (please write legibly) _____

Emergency Contact _____ Phone _____

Student's full name _____ Sex _____

Birth date _____ School _____ Grade _____

Allergies or Medical Conditions _____

Dr's name and phone _____

Classes	Day	Time	Tuition
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Registration Fee \$50.00

TOTAL _____

I am aware that all tuition payments are due in full the FIRST CLASS DAY of each month and NO LATER THAN THE TENTH of each month. A LATE FEE of \$25.00 will be incurred for payments made after the close of business on the 10th of each month. Absolutely no pro-rating of tuition will be made. Make-up classes are available for missed classes.

Waiver of Liability/Photograph Consent Form

I, the undersigned parent or guardian do hereby agree to allow the individual(s) named herein to participate in the aforementioned activity(ies) and I further agree on behalf of myself and my minor child/ward to release, indemnify and defend, and hold the Shely Pack Dancers, its agents, employees, independent contractors, and volunteers, harmless from, and against any and all liability for any injury which may be suffered arising out of, or in anyway connected with participation by the aforementioned individual(s) in this activity/program.

I, on behalf of my minor child/ward, agree to participate in this activity knowing that it may involve risk of serious injury, and that accidents may occasionally occur during this activity, and thus assume any and all such associated risks. This waiver, release, and assumption of risk discharges the Shely Pack Dancers, its agents, employees, independent contractors, and volunteers from any and all liability arising out of, or connected in any way with, participation in this activity by the individual(s) named herein, even though that liability might arise out of negligence or carelessness on the part of the Shely Pack Dancers, its agents, employees, independent contractors, and/or volunteers.

This waiver, release and assumption of risk binds my heirs and assigns, and those of the aforementioned individual(s).

The Shely Pack Dancers or its authorized agents may photograph and/or videotape participants in Shely Pack Dancers sponsored recreation activities. I hereby acknowledge and consent to the Shely Pack Dancer's use of the aforementioned individual(s)' name, voice, photograph, video, and/or likeness in the Shely Pack Dancers website, Shely Pack Dancers advertising, and any promotional material uses related to the Shely Pack Dancers.

Parent Signature _____ Date _____