

# Schramel Conservatory of Dance Registration and Release Form

Amount Paid: \_\_\_\_\_ Circle: Cash / Online / CC / Check #  
Registration Fee Paid: Yes/ No

## Student Information (please print):

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Age \_\_\_\_\_ DOB \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## Class(es) Enrolling In:

Class: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Start Time: \_\_\_\_\_

Class: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Start Time: \_\_\_\_\_

Class: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Start Time: \_\_\_\_\_

Class: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Start Time: \_\_\_\_\_

Class: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Start Time: \_\_\_\_\_

Parent Guardian 1: \_\_\_\_\_

Parent Guardian 2: \_\_\_\_\_

(please print)

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone contact #'s M-cell (\_\_\_\_\_) \_\_\_\_\_ F-cell (\_\_\_\_\_) \_\_\_\_\_

Home (\_\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_\_) \_\_\_\_\_

Email contact \_\_\_\_\_

- 
- 1) I understand that Dance is a physical art form and injury is inherent. Every effort has been made to keep the learning environment ( studio ) safe and an appropriate environment for learning and performing dance class. If an injury does occur, the student or student's parent/guardian is responsible for medical expenses incurred and will not hold Schramel Conservatory of Dance liable.

\* \_\_\_\_\_ ( please initial )

- 2) The Directors and Faculty are qualified to teach students at the appropriate level and have the right to advise a student if they feel the student is not ready for a certain level. I understand every effort has been made to place students at the appropriate level for their abilities.

\* \_\_\_\_\_ ( please initial )

- 3) I understand that the student will be touched appropriately by the teacher in order to achieve a certain position of the body as it pertains to the dance form.

\* \_\_\_\_\_ ( please initial )

- 4) Every parent/guardian is responsible for the student once the student leaves the studio in which dance class has taken place. The teacher will only release the student to a parent or guardian known to be responsible party for the student. Once the child leaves the studio, he/she must be accompanied by an adult when moving from the Conservatory through the building or to the parking lot or street.

\* \_\_\_\_\_ ( please initial )

- 5) All students under the age of 6 must have a parent/guardian in the downstairs waiting area during class. No guardians are allowed upstairs.

\* \_\_\_\_\_ ( please initial )

- 6) I certify the student has no health issues, which could impact or interfere with their ability to safely participate in dance class.

\* \_\_\_\_\_ ( please initial )

If there is a health issue, I will notify the Director of the problem.

I hereby declare all of the above to be true to my knowledge. I understand all of the above and sign as legal guardian or student ( if adult.)

Signed \_\_\_\_\_ Date \_\_\_\_\_