

BSD REGISTRATION/RELEASE

Please sign front and back.

STUDENT

First Name _____ Last Name _____

Address _____ State _____ Zip _____

Birthday _____ School _____ Grade _____

Cell Phone _____

Returning Student? _____ Years at Studio _____ New Student _____ (check one)

PARENT / GUARDIAN

First Name: _____ Last Name: _____

Relationship to Student _____ Employer _____

Home Phone _____ Cell Phone _____

Work Phone _____ Email _____

Were you Referred *Y/N* By Who _____

POLICY AND PROCEDURE

I have read and agree to all Policies and Procedures found in either the Baltimore School of Dance online Policy and Procedure section or booklet.

Signature: _____ Date: _____

CONSENT AND RELEASE

Baltimore School of Dance requests that each student enrolled consult with a physician with respect to any past or present illness or injury that may affect his/her participation in and ability to endure the dance program.

I hereby waive and release Baltimore School of Dance and its officers, agents, volunteers, and employees from all acts or omissions resulting in any physical injuries, medical treatment, or other damages to myself or any minors of whom I am parent or legal

guardian, resulting from participation in Baltimore School of Dance programs. I further waive and release Baltimore School of Dance and its officers, agents, volunteers, and employees from any damages sustained by the aforementioned or any guests of the aforementioned as a result of any condition, act, omission or accident on or at Baltimore School of Dance or any other premises upon which any activity related to Baltimore School of Dance takes place.

Baltimore School of Dance reserves the right to suspend or remove any individual from class in the event of behavioral problems, with an understanding that if the individual is removed, there will be no credit given. Baltimore School of Dance is not responsible for personal material, injuries, or liabilities.

PHOTO, VIDEO, & AUDIO RELEASE: I hereby give permission to Baltimore School of Dance to photograph, video, film, and/or audio record my child and/or me. I consent to the use of such materials for all uses including recital videos, class photos, and all promotional material, including the Baltimore School of Dance Web Site. This release is granted in perpetuity.

I understand there are **NO REFUNDS** given; a studio credit will be issued.

Signature: _____ Date: _____