



REGISTRATION FORM

Student Name _____ DOB _____ Grade _____
Mailing Address _____ Phone _____
City _____ State _____ Zip _____
Mother's Name _____ Work Phone _____ Cell _____
Father's Name _____ Work Phone _____ Cell _____
Parent E-mail please print clearly _____ Student E-mail if applicable _____

**EMERGENCY CONTACT
IF PARENTS CANNOT BE REACHED**

Does your child have any disabilities restricting normal program participation?
Yes () No () if yes, please describe

Name _____
Relationship _____
Phone: _____

CLASSES YOU ARE ENROLLING YOUR CHILD IN, PLEASE LIST

1. _____ Day & Time _____ 4. _____ Day & Time _____
2. _____ Day & Time _____ 5. _____ Day & Time _____
3. _____ Day & Time _____ 6. _____ Day & Time _____

MEDICAL RELEASE

Should my child be taken to a clinic or hospital for emergency purposes, I hereby grant permission to the attending Physician and staff to treat my child: for anesthesia, medical, X-ray, and/or surgical procedures, as may be deemed necessary or advisable.

I understand that in an emergency an attempt will be made to communicate with me prior to use of this permission.

Our Doctor's Name: _____
Doctor's Phone _____ Are You Insured? Yes () No ()
Our Insurance Company _____

Assumption of Risk: I recognize that participation in dance and activities involving movement exercise carries with it the risk of catastrophic injury. [] I have read and agree.

Release of Liability: I release and hold harmless Creative Edge Dance Studio its owners and contractors from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant and/or the undersigned, while in or upon the premises or any premises under the control and supervision of Creative Edge Dance Studio, its owners and contra or in route to or from any of said premises. [] I have read and agree.

Creative Edge Dance Studio provides a fun, rewarding, and challenging experience in the exploration of dance to students of all ages and abilities. This results from the collaboration among parents, students, and teachers. Class participation/attendance, a positive approach to learning, adherence to studio policies, and parental support are important factors influencing the experience of your student and others enrolled in class. In order to maintain a welcoming atmosphere, Creative Edge Dance Studio reserves the right to dismiss any student.

I have read and agreed to the above information:

Signature Parent or Guardian _____

PHOTO CONSENT: Please take the time to read and fill out our Photo Consent Form on the back of this sheet. If you have already filled one out, please disregard.



Photo Policy and Consent Form

We'd like to post some photos of our classes, performances, and general "studio life." If you have any photos that you think would work on our site please forward them to Kathy at creativeedgedancestudio@msn.com.

We respect your feelings about posting pictures on the web and will NOT post pictures of students without a signed consent form found below.

If you do not fill out this form, we will assume you do NOT want your child's image used by Creative Edge Dance Studio

Photo Use Policy

Creative Edge Dance Studio requires a signed release form from the subject of any photograph or image used on web sites, studio brochures, or advertisement. Creative Edge Dance Studio will not publish any image of a minor unless his or her parent or legal guardian has signed a permission form.

Group photographs do not require consent before publication.

Photo Release and Consent Form

I hereby grant permission to Creative Edge Dance Studio to use my image or that of my child(ren) listed below on its World Wide Website or in other studio publications without further consideration. I understand that no names will be used on the web site or in publications unless specific permission, verbal or written, is given to the appropriate staff member ***Kathy Kohatsu***.

I understand that once any image is posted to the Creative Edge Dance Studio web site, the image can be downloaded by any computer user around the world. I hereby attest that I am the legal parent or guardian of the child(ren) listed below. This consent is effective until such time as I revoke it in Writing and provide a copy of the revocation to Creative Edge Dance Studio

Effective immediately, on the _____ day of, _____ 20_____

Print full legal name of parent or guardian.

Legal signature

Print full legal name of minor

Print full legal name of minor

Print full legal name of minor

Print full legal name of minor