

## Registration is for the FULL academic year

Payment Agreement: By signature below, Student/Guardian agrees to: 1) payment of tuition and fees; 2) tuition installments will be paid during the first week (7 days) of each month. 3) implementation of a \$15.00 late fee for any tuition installment paid after the 7th of each month. 4) make up missed classes in the same or lower level within the semester only; 5) no transfer or cash refunds. In the case of injury, tuition may be refunded or transferred on a prorated basis ONLY upon receipt of doctor's confirmation in writing; 6) student is liable for court fees for non-payment of tuition due; and 7) a 10% discount on tuition only for the registration of two or more family members and/ or those attending 3 or more classes. 8) \$15.00 may be deducted from the registration fee for additional family member(s).

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Student/Parent/Guardian PRINTED NAME	Student Name (only if a minor)
Student/Parent/Guardian SIGNATURE	Date

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## Health Guidelines and Liability Waiver

*This form must be signed and submitted by all individuals (minors and adults) who enter Studio of Dance's studio facilities. This form serves to release and agree to hold Studio of Dance harmless from all liability, not only pertaining to the most recent variant of COVID—19 EG.5. In the case of a minor, a parent or legal guardian must sign on behalf and submit.*

Studio of Dance WILL enforce a mask mandate for any student, faculty or staff member should the CDC determine its necessity at any time during our academic year. We respect each individual's personal decision outside of the studio environment and will NOT seek out vaccination records. We ask that our clients respect our decision based on robust scientific evidence of mask efficacy in reducing the transmission of COVID-19. ALL students, parents, caregivers and transportation drivers should tuck a mask in their dance bag, vehicle, handbag and/or pocket throughout the academic year should the CDC issue mask mandates.

### **Cleaning and Sanitation Protocol**

Studio of Dance will be sanitizing and cleaning the studio, ballet barres, restroom and common areas on a daily basis. We encourage students to bring their own clearly labeled water bottle and to keep personal items to a minimum.

### **Confidentiality**

Studio of Dance will respect the privacy and confidentiality of any student who reports an illness.

**Release of Liability**

Studio of Dance and its faculty take every precaution to provide an injury-free experience for its artists and students. In the event of dancer injury or accident, Studio of Dance and its Guest Faculty assume no responsibility, financial or otherwise. I hereby waive and release all rights and claims against Studio of Dance and its employees, directors, faculty, and associates from any damages or injuries sustained by myself or my child in classes, on studio premises, or at any outside studio event. I further acknowledge that Studio of Dance can not guarantee that I will not become infected with COVID-19 while on studio premises. I voluntarily seek classes/rentals provided by Studio of Dance and acknowledge that I am increasing my risk to exposure to COVID-19. I acknowledge that I must comply with all set procedures, which can change at any time, including the required shift to a virtual platform to reduce the spread while attending my class.

I hereby release and agree to hold Studio of Dance harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of actions, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by an act, or failure to act of Studio of Dance, or that may otherwise arise in any way in connection with any services received from Studio of Dance. I understand that this release discharges Studio of Dance from any liability or claim that I, my heirs, or any personal representatives may have against the Studio of Dance with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Studio of Dance. This liability waiver and release extends to the studio together with all owners, partners, and employees.

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Student/Parent/Guardian PRINTED NAME

Student Name (only if a minor)

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\_\_\_\_\_

Student/Parent/Guardian SIGNATURE

Date

## PHOTO / VIDEO RELEASE

I hereby give permission for images of my child, captured during *Studio of Dance* classes/shows/events through video, photo and digital camera, to be used solely for the purposes of *Studio of Dance* promotional material and publications, and waive any rights of compensation or ownership thereto.

Name of Student (please print): \_\_\_\_\_

Age: \_\_\_\_\_

Student Signature: \_\_\_\_\_

If Student is under 18:

Name of Parent/Guardian (please print): \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_

Date: \_\_\_\_\_