



Student Registration Form 2011-2012
(Please fill out separate forms for each student)

Student Name _____ Age _____ Birthday _____

Parent/Guardian Name(s) _____

Address _____

Home Phone _____ Cell Phone _____

E-mail Address _____

Who else is authorized to pick up your child? _____

Emergency Contact: _____

Any Medical Conditions? _____

Please list classes you will be taking: (include days and times)

Total Monthly Tuition: _____

One Time Registration Fee: \$10- New Students Only

RELEASE and WAIVER of LIABILITY and INDEMNITY AGREEMENT for 8 Count LLC.
Physical activities carry a risk of injury to participants. I hereby release 8 Count LLC, it's staff, contractors, volunteers and the event facility from any liability for personal injuries or loss of, or damage to personal property. I give permission to 8 Count LLC to provide and/or seek medical attention for my child should medical treatment be required and I will assume all costs of my child/children's medical bill(s). In addition, I grant 8 Count LLC permission to utilize event photos, videos, and statements without compensation for advertising purposes. Each participant may refuse to participate in any activity. If there are any doubts as to a dancer's physical ability, please consult your physician before participating. I also understand that there are NO REFUNDS at anytime for any reason.

I have read this waiver agreement, understand its contents, and accept and assume such risks.

Print Participant Name

Signature of parent or guardian
If participant is less than 18 years of age

Thank You For Choosing 8 Count Dance!