



## REGISTRATION FORM

Students Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Parents Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Parent Cell or Pager# \_\_\_\_\_

**Please enroll the above student in the following class(es):**

Class Name	Day	Time
_____	_____	_____
_____	_____	_____
_____	_____	_____

Monthly Payment Amount \$ \_\_\_\_\_

Annual Registration/Insurance Fee \$ \_\_\_\_\_

“Easy Pay” Enrollment Discount (-\$20 per family) \$ \_\_\_\_\_

Total Amount Due: \$ \_\_\_\_\_

**RELEASE FROM LIABILITY, WAIVER OF CLAIMS AND ASSUMPTION OF RISK**

By signing this release waiver I agree that In Motion Dance Center along with its owners, instructors and employees (collectively referred to herein as the studio) shall not be responsible for any injury suffered by the student. I understand that dance and cheerleading activities as conducted and taught at the studio have inherent risk of injury. The student and I assume and accept all risk of injury or damages resulting from such dance activities. The student’s participation in this activity is purely voluntary and the student elects to participate and I join in that election, in spite of the risks.

I also agree that the studio is not responsible for any property loss or damage suffered by the student or any guests or parents of the student that results upon entry into or presence in the studio or its surrounding property.

I further understand that I have been advised of the need for the student to be covered by adequate insurance to cover any injury or damage that may be suffered while participating, and I have obtained such coverage or agree to bear the costs of any such injury or damage myself.

By signing this release I confirm that I have read this release in full and understand its terms and agree with those terms.

Student’s Name: \_\_\_\_\_ Parent’s Name: \_\_\_\_\_

Parent’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone # \_\_\_\_\_

**Please mail this form and payment to:**  
**In Motion Dance Center**  
**835 Arnold Drive Suite 5, Martinez, Ca 94553**  
**Thank you for registering with In Motion Dance Center!**