



**CONTACT INFORMATION**

Student 1 Full Name: ..... Birthday: .....

Student 2 Full Name: ..... Birthday: .....

Student 1 Mobile: ..... Student 2 Mobile: .....

Father's Full Name: ..... Mobile: .....

Mother's Full Name: ..... Mobile: .....

Address: .....

City: ..... State: ..... Zip: .....

Email: .....

**MEDICAL CONTACT**

Doctor's Name: ..... Phone: .....

Allergies/Medical Problems/Physical Disabilities/Other:  
.....

**HOW DID YOU HEAR ABOUT US?**

Flyer: ..... Driving By: ..... Word of Mouth: ..... Web Search: .....

Facebook: ..... Other: .....



**LIABILITY WAIVER**

**PLEASE READ AND SIGN BELOW. REGISTRATION IS INCOMPLETE WITHOUT SIGNATURE AND MUST BE COMPLETED BEFORE CLASS**

I understand and agree that in participating in any dance class, exercise, workshop, event, party, rehearsal or performance, there is a possibility of physical injury or death. I voluntarily agree, therefore, to assume all risks and responsibility for any such injury or accident, which might occur to me or my child during any of Center Stage Miami Dance Academy classes, exercises, rehearsals, performances, or activities. I also exempt, release, and indemnify Center Stage Miami Dance Academy, its owners, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students from any and all liability claims, demands, or causes of action whatsoever from any damage, loss, injury, or death to me, my children, or property which may arise out of or in connection with participation in any classes or activities conducted by Center Stage Miami Dance Academy.

I further hereby voluntarily agree to waive my rights and that of my heirs and assigns to hold Center Stage Miami Dance Academy, its owners, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students liable for such damage, loss, injury, or death. I understand that I should be aware of my physical limitations and agree not to exceed them. If I am signing this waiver for my children, I certify that I am the parent or legal guardian and have the right to waive these rights.

Permission is granted to Center Stage Miami Dance Academy to use photographs of students for publicity purposes.

**I have read, understood and agree to be bound by the above statement.**

Please print your name, sign & date:

**PARENT/GUARDIAN/STUDENT:** .....  
*(Print full name.)*

**PARENT/GUARDIAN/STUDENT SIGNATURE:** .....  
*(If under 18 years old, parents or legal guardian must sign.)*

**FOR:** .....  
*(Print name of student if under 18 years old.)*

**DATE:** .....