

2018 New York City Summer Workshops Application



Summer Intensive Workshop

June 4 - June 22, 2018

Master Choreography Workshop

June 25 - June 29, 2018

NAME: _____ D.O.B.: ____ / ____ / ____

ADDRESS: _____ APT: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

SCHOOL: _____ GRAD. YEAR: _____

HOW DID YOU HEAR ABOUT THE WORKSHOPS? Parsons Dance Website Parsons Dance E-news DanceNYC.org Facebook

School Friends / Parsons Dancer (if so, whom) _____ Other _____

REGISTER AND PAY IN FULL BY MARCH 17, 2018 FOR EARLY BIRD REGISTRATION TUITION DISCOUNT

- \$1275* Summer Intensive Workshop ONLY (after MARCH 17 \$1375)
- \$1825* Summer Intensive Workshop PLUS Master Choreography Workshop (after MARCH 17 \$2000)
- \$550* Master Choreography Workshop ONLY (after MARCH 17 \$625)

\$200 Non-refundable deposit reserves your place. Please make checks payable to Parsons Dance.

I HAVE ENCLOSED: CHECK AMEX MASTERCARD VISA DISCOVER

CARD #: _____ CVV: _____ EXP. DATE: _____ BILLING ZIP: _____

NAME AS IT APPEARS ON CARD: _____ PLEASE CHARGE \$ _____ TO MY CARD

TUITION BALANCE DUE BY MONDAY MAY 28, 2018. NO REFUNDS AFTER MAY 28.

LIABILITY WAIVER: In consideration of being permitted to participate in the Parsons Dance New York City Summer Workshops ["Workshops"], June 4-June 29, 2018, I hereby waive, release, hold harmless & indemnify and forever discharge Parsons Dance and its principals, officers, agents, insurers, and employees from liability from any and all claims, actions, and causes of action (including resulting from negligence) that may at any time result from my participation in the Workshops, including any such that relate to costs, expenses, or damages to my personal property or for personal injury or illness (including death).

I confirm that I am over 18 years of age. I am in good health and physically fit and do not have any injury or disability which might jeopardize my participation in the Workshops.

I confirm that my participation in the Workshops is voluntary. I assume all risks of any damage, injury, or disability to my person or property that may occur as a result of my participation in the Workshops and acknowledge that I will be solely responsible for any and all costs and expenses that I may suffer as a result of my participation in the Workshops. I hereby give up any right that I might otherwise have to sue for injury or damages resulting from my participation in the Workshops.

By signing below I confirm that I have read and accepted the conditions to my participation in the Workshops as set forth above. I understand that I am giving up substantial rights including the right to sue.

APPLICANT AGREES (required) SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN (if under 18 years old) SIGNATURE: _____ DATE: _____

PHOTO RELEASE AGREEMENT: I hereby give permission for images of myself, captured during the Parsons Dance New York City Summer Workshops through video, photo and digital camera, to be used solely for the purposes of Parsons Dance promotional material and publications, and waive any rights of compensation or ownership thereto.

APPLICANT AGREES (required) SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN (if under 18 years old) SIGNATURE: _____ DATE: _____

**HOW TO APPLY: Email dance resume, headshot, application and deposit/tuition to intensives@parsonsdance.org
Or mail to Parsons Dance - 229 West 42nd Street, New York, NY 10036**