

**ARIEL DANCE STUDIO 2385 Winchester Blvd. Campbell, CA 95008  
REGISTRATION AND WAIVER FORM (2008)**

**PLEASE PRINT CLEARLY**

First Name (If filling out for a child, please list child's name)	Last Name	Age (If filling out for a child, list date of birth)
Street Address	City	Zip Code
Home Phone (include area code)	Work Phone (include area code)	
Cell Phone (include area code)	E-mail (PRINT CLEARLY) _____	
Current Occupation (if in school, list school's name)	Hobbies	

If an emergency should occur, please list two people with whom we may communicate:

Name \_\_\_\_\_ phone \_\_\_\_\_ relationship \_\_\_\_\_

Name \_\_\_\_\_ phone \_\_\_\_\_ relationship \_\_\_\_\_

Medical conditions instructor should be aware of: \_\_\_\_\_

**DANCE TRAINING: (check all that apply)**

- Ballet, Years \_\_\_\_                       Modern Dance, Years \_\_\_\_  
 Hip Hop, Years \_\_\_\_                       Ballroom, Years \_\_\_\_  
 Jazz, Years \_\_\_\_                               Tap, Years \_\_\_\_  
 Other: \_\_\_\_\_, Years \_\_\_\_

**What are your dance goals?**

- Build strong dance technique  
 Build flexibility, get fit, reduce stress, have fun  
 Become familiar with a variety of dance techniques including Jazz, Modern, Ballet, Tap, Hip-Hop  
 Develop competency as a dancer in public performances  
 Other: \_\_\_\_\_

**What dance styles would you like to see offered at our studio?**

Let us know if you would like to see something added, or if you have something special to offer to our dance studio.

**REGISTRATION INFORMATION:**

**How did you hear about Ariel Dance Productions?**

- Word of Mouth    Flyer    Yellow Pages    Coupon    Dance Workshop    Internet Search    Walk by  
 Friend: Name \_\_\_\_\_ Other: \_\_\_\_\_

**CLASS YOU WISH TO REGISTER FOR:**

Name of Class: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_

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Payment (select class series plus \$25 registration fee): \_\_\_\_\_ Cash \_\_\_\_\_ Check: \_\_\_\_\_

**INSURANCE WAIVER:** Any dancer participating in a dance class takes certain incumbent risks. These include, but are not limited to, sprains, pulled muscles, and broken bones. Participation in Ariel Dance Productions indicates the acceptance of such risks. Ariel Dance Productions and the host venue assume no responsibility for personal injury or property lost at its events. I will not hold the Ariel Dance Productions responsible in case of accidents

or injuries that occur during dance class or performances. **By signing this form, I also understand that there are NO REFUNDS, CREDITS, MAKE UP OR EXTENSIONS for missed class series.**

Print Full Name: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*If dancer is under 18 years of age, a signature of a parent or legal guardian is required.*

Print Full Name of Parent/Legal Guardian: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_