2016-2017



www.onstageschoolofdance.biz 310 7th St. Ne. Suite #2 Buffalo MN 55313 763-682-9685

STUDENT NAME
PARENT/GUARDIAN NAME
ADDRESS
CITYZIP
CELL NUMBER OR BEST NUMBER TO CONTACT
AGEBIRTHDATE
SCHOOL & GRADE ATTENDING FALL 2016
MEDICAL CONDITIONS TO BE AWARE OF?
LIST ANY PREVIOUS DANCE TRAINING (yrs. studio ect.)
HOW DID YOU HEAR ABOUT ON STAGE?
EMAIL TO SEND MONTHLY NEWSLETTERS TO
WE HEREBY RELEASE ALL PERSONS AFFILIATED WITH "ON STAGE" FROM ANY AND ALL CLAIMS FOR INJURIES, WHICH MAY BE SUSTAINED WHILE PARTICIPATING IN ACTIVITIES CONNECTED WITH ON STAGE.
PARENTS SIGNATURE
**DUE TO CLASS OVERFLOWOR NOT ENOUGH PARTICIPANTS CLASSES MAY NEED TO BE SPLIT OR CANCELED. PLEASI CIRCLE DAYS OF THE WEEK THAT WILL "NOT WORK FOR YOU".
MON. TUES. WED. THURS. FRI. SAT.
1ST CLASS CHOICE 2ND CLASS CHOICE **YES I WOULD LIKE INFORMATION ON THE COMPETITION GROUPS FOR 2016/2017 GRADE 1 AND HIGHER
STUDIO USE YEARLY REGISTRATION FEE PAID



2016-2017 ON STAGE SCHOOL OF DANCE RELEASE FORM

In consideration of participating in Dance, and for the good and valuable consideration, I hereby agree to release and discharge from all liability arising from negligence On Stage School Of Dance and its owners, directors, employees, volunteers, participants and all persons or entities acting for them, on behalf of myself and my children, parents, heirs, assigns, personal representatives and estate and also agree as follows:

- 1. I acknowledge that DANCE involves known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, muscle or ligament tears, strains, sprains, pulls, broken bones, dislocations, joint problems, shin splints, heat exhaustion, knee, back, hip or foot injuries, as well as the potential for heart attack. I understand such risks simply cannot be eliminated, without jeopardizing the essential qualities of the activity.
- 2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of On Stage School Of Dance.

My participation in this activity is purely voluntary and I elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I am unable to participate due to physical or medical conditions, then I will immediately discontinue participation.

3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless On Stage School Of Dance from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their facilities, arising from negligence.

This release does not apply to claims arising from intentional conduct. Should On Stage School Of Dance or anyone acting on their behalf be required to incur attorney's fee's and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.

- 4. I represent that I have adequate insurance to cover any injury or damage I may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.
- 5. In the event that I file a lawsuit, I agree to do so solely in the state where On Stage School Of Dance is located, and I further agree that the substantive law of that state shall apply.
- 6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By Signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing.

Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if I were to choose not to sign this release, and agree that the opportunity to participate at the stated cost in the return for the execution of this release is a reasonable bargain.

have read and understood this document and I ag	ree to be bound by its ter	ms.	
Print Name		_ *	\$
Address City State Zip		3	
Phone			

PARENT OR GUARDIAN ADDITIONAL AGREEMENT

(Must be completed for participants under the age of 18)

In Consideration of being permitted to participate in this activity, I further agree to indemnify and hold harmless On Stage School Of Dance from any and all claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Parent or Guardian	Signature	
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