

2017-2018 REGISTRATION/HEALTH FORM

Please inform us immediately if any of the following information changes!

Student's Information:

Student's Name (1st child): _____ Age: _____ Birthday: ___/___/___
School _____ Grade _____ T-Shirt Size As of December: _____

If applicable:

Student's Name (2nd child): _____ Age: _____ Birthday: ___/___/___
School _____ Grade _____ T-Shirt Size As of December: _____

How did you hear about DANCE SOUTH? _____

Parent's Information:

Mailing Home Address: _____

City: _____ State: _____ Zip Code: _____

Mother's Name: _____ Cell Phone # (____) _____

Employer: _____ Work Phone# (____) _____

Mother's SS#: _____ Home Phone# (____) _____

Father's Name: _____ Cell Phone # (____) _____

Employer: _____ Work Phone# (____) _____

Father's SS#: _____ Home Phone# (____) _____

E-mail address: _____

Emergency Contact Information (Used only after failure to contact parents):

1) Name: _____ Main Phone # _____

2) Name: _____ Main Phone # _____

Medical Information:

Family Physician: _____ Work Phone # _____

Insurance Info: Policy # _____ Group# _____

Company: _____

List any medical conditions, allergies, or disabilities:

1st child: _____

Daily Medications: _____

2nd child: _____

Daily Medications: _____

Circle One:

Do you authorize me to seek medical attention in case of an emergency? Yes No

Do you authorize me to give your child(ren) Tylenol or Benadryl if necessary? Yes No

I hereby enroll the above student(s) and agree to pay ALL tuition by the 15th of every month and any fees due in accordance with Dance South policies. Parents and students assume risk of injury associated with dance, gymnastics, cheerleading and/or Ninja Zone and hold harmless, Dance South; it's owner, it's staff, and instructors. By signing below I acknowledge that I have read and understand the payment policies, late fees, dress code and other policies of Dance South. If I fail to comply with Dance South's policies and/or regulations, the owner or its instructors of Dance South reserve the right to discontinue lessons for me or my child(ren).

Signature: _____

Date: _____

(To verify understanding of this agreement)

(office only) Completed by _____ IC _____ Date _____

**MUST BE SIGNED TO BE A PARTICIPANT OF THE DANCE SOUTH
GYMNASTICS/CHEERLEADING/NINJA ZONE PROGRAM
WAIVER OF LIABILITY**

Dear Parents,

On behalf of Dance South, we welcome you and your child(ren) into our family. We all look forward to a wonderful year and it is our sincere hope that your child(ren) will have an enjoyable learning experience.

Our Gymnastics, Ninja Zone and Cheerleading staff are trained and highly qualified to ensure a safe learning environment. We are trained to spot and monitor each and every skill performed in the gym. In consideration of participation in Gymnastics/Ninja Zone/Cheerleading, I represent that I understand the nature of these Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activities. I acknowledge that if I believe conditions are unsafe, I will immediately discontinue participation in these Activities. During the course of the year, your child will train under the supervision of our staff on the following equipment, but not limited to, spring floors, balance beams, uneven parallel bars, vaults, trampolines, mats, and/or training equipment, etc. I fully understand that these Activities involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of other's participation in the event, the conditions in which the event takes place, or the negligence of the "releases" named below. Such injuries/death could result from use of such equipment in class, and around the studio, gym, exhibitions, festivals, parades, performances, conventions, and/or, but not limited to, competitions. In addition, such injuries and death could occur from the (student's) misuse or abuse of such equipment. I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in the Activities. I hereby release, discharge, and covenant not to sue Dance South, LLC or Ninja Zone, its respective administrators, directors, agents, officers, volunteers, employees, other participants, sponsors, advertisers and, if applicable, owners and lessors of premises on which the Activities takes place (each considered one of the RELEASEES herein), from all liability, claims, demands, losses, or damages on my account caused in whole or in part by the negligence of the "releases" or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releases, I will indemnify, save, and hold harmless each of the Releases from any loss, liability, damage, or cost, which any may incur as the result of such claim. If any such unfortunate event occurs, our trained coaches will seek or give appropriate medical attention immediately.

Thank you very much,

Allyson Sherer, Owner/ Lead Dance Instructor, NINJA ZONE certified and Director

Taylor Stacy, Head Gymnastics Coach, NINJA ZONE certified

Hannah Gault, Competitive/Recreational Gymnastics Coach, NINJA ZONE certified

Mackenzie Thompson, Competitive/Recreational Gymnastics Coach, NINJA ZONE certified

Alexandra Barker, Recreational Gymnastics Coach

Elizabeth Holland, Cheerleading and Pre Gym Coach, NINJA ZONE certified

Mike Norman, NINJA ZONE certified

Ravyn Burgos, Cheerleading and Pre Gym Coach

INDEMNITY AGREEMENT

I, _____ have read the Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect. I agree to provide correct medical information in the event of injury or if my child needs to have medical treatment.

Signature _____

Date _____

Dance South Witness _____

Date _____

DANCE SOUTH COSTUME DEPOSIT

I, _____, understand that by signing below, the costume deposits will go towards the **balance** of the May Dance Recital Costumes and/or Gymnastics Exhibition, but **may or may not fully pay** for the costumes in full. I am aware that when I pay a costume deposit, my child/ren **will** have costumes for the events whether he/she/they are able to attend. I fully understand that, regardless if my child/ren do not participate, I am responsible for the balance of the costumes once they have been ordered. In addition, costume deposits are non-refundable. Dance South **will not** notify me prior to ordering costumes in December because this form will serve as a binding agreement for Dance South to order my child/ren's costumes.

If I do not accept this agreement, I will sign this costume deposit form accordingly, and will not pay the costume deposit (***see details below**) per child. I understand that Dance South will not ask me again this season, to purchase costumes for the May Recital and/or Gym Exhibition and my child/ren will not have costumes in the Dance Performance or Gym Exhibition.

(NINJAS ARE ONLY REQUIRED TO PURCHASE NINJA SHIRT & HEADBAND)

Yes, I understand the above agreement _____
 Parent's Signature _____ Date _____

No, I don't want a costume for my child _____
 Child's name _____ Parent's Signature _____ Date _____

I am currently undecided, but **I will contact Dance South by Dec 1** with a definite yes or no:

 Parent's Signature _____ Date _____

***Average costume cost is \$65 – a costume deposit will be due for each art form your child takes**

- *Upon registering, a 1st COSTUME DEPOSIT of \$50 is due
- *The 2nd COSTUME DEPOSIT of \$50 is due by Sept 15 (only those that have 2 costumes)
- *The 3rd COSTUME DEPOSIT of \$50 is due by Oct 15 (only those that have 3 costumes)
- *The 4th COSTUME DEPOSIT of \$50 is due by Nov 15 (only those that have 4 or more costumes)
- *Costumes will be ordered between Dec 1 and Dec 15
- *Costume Invoices will go out the 1st day of classes in Jan
- *Costume Balances will be due between Jan 15 and March 15.
- *WE HOPE THIS WILL ELIMINATE HIGH COSTUME BALANCES AFTER CHRISTMAS.

TROPHY/MEDAL ORDER FORM

TROPHIES AND MEDALS ARE OPTIONAL

1st Student's Name: _____ Total years of dance, gym, cheer or ninja? _____
 2nd Student's Name: _____ Total years of dance, gym, cheer or ninja? _____
 3rd Student's Name: _____ Total years of dance, gym, cheer or ninja? _____

What topper would you like for Commemorative Trophy? Dance Gym Cheer

- | | |
|----------------------------------|---|
| 10" Dance Trophy (\$8) _____ | 13" Commemorative 5 Yr. Trophy (\$12) _____ |
| 10" Cheer Trophy (\$8) _____ | 19" Commemorative 8 Yr. Trophy (\$25) _____ |
| 2.5" Gym/Ninja Medal (\$5) _____ | 32" Commemorative 10 Yr. Trophy (\$38) _____ |
| Male _____ | 36" Commemorative 12 Yr. Trophy (\$43) _____ |
| Female _____ | 59" Commemorative 15 Yr. Trophy (On Me) _____ |

Total Trophy _____
Total Medal _____
Total _____

I AGREE THAT THE ABOVE TROPHY/MEDAL ORDER IS CORRECT & I UNDERSTAND THAT IT'S DUE IN JAN.

Parent Signature _____

NO, I DO NOT WANT TO ORDER A TROPHY/MEDAL FOR MY CHILDREN.

Parent Signature _____

***THIS WILL BE ADDED TO YOUR COSTUME INVOICE IN JANUARY**