



Registration for 2020-2021 Dance Season

STUDENT Information:

Student #1 (*Denotes Required fields, if applicable)		
Last Name:*	First Name:*	
Home Phone:*	Date of Birth:*	Age:*
Student E-Mail:*	Student Cell:*	
Address:*		
City:*	Zip Code:*	
Please list any health or physical restrictions (please include allergies):*		
Student #2 (*Denotes Required Fields, if applicable; Home Phone and Address if different from Student #1)		
Last Name:*	First Name:*	
Home Phone:	Date of Birth:*	Age:*
Student E-Mail:*	Student Cell:*	
Address:		
City:	Zip Code:	
Please list any health or physical restrictions (please include allergies):*		
Student #3 (*Denotes Required Fields, if applicable; Home Phone and Address if different from Student #1)		
Last Name:*	First Name:*	
Home Phone:	Date of Birth:*	Age:*
Student E-Mail:*	Student Cell:*	
Address:		
City:	Zip Code:	
Please list any health or physical restrictions (please include allergies):*		

****New Students Only****

Previous Experience: (Please list former studio, type of dance and how many years)

Reason for leaving previous studio: _____

PARENT/LEGAL GUARDIAN Information: (**Denotes Required Fields, if applicable*)

Name:* _____

Name:* _____

Work Phone:* _____

Work Phone:* _____

Cell Phone:* _____

Cell Phone:* _____

E-Mail:* _____

E-Mail:* _____

Relationship
to student:* _____Relationship
to student:* _____

Person responsible for billing:* _____

Address & Phone if not the same as student(s):*

Emergency Contact if the above are not available:

Name:* _____

Phone:* _____

Relationship to student:* _____



Release of Claims and Medical Treatment Authorization

Student Name

Date

Parent/Legal Guardian Name

Date

I am aware that dancing, acro and gymnastics exercise associated with it, place stresses on the body and having the possibility and risk of physical injury. It is understood that dance instruction is a physical activity and art form. It may be necessary for instructors to place hands on the student for proper placement and correction of body alignment. Each Student/Parent/Legal Guardian has the right to decline participation in which they are not comfortable or which they feel may be harmful.

Student/Parent/Legal Guardian understand and expressly assume all risks involved in connection with instruction, rehearsal, training, shows, performances and competitions, at **emjæz DANCE STUDIO, LLC** and/or performance spaces and/or any other venues including but not limited to risk of bodily injury occurring as a result of contact with other students, instructors, walls, equipment, floors, structures, poles, and other objects located in or near dance studios, and/or any other performance spaces and /or any other venues, the student's physical condition or physical limitations.

Student and Parent/Legal Guardian waive all claims arising out of dance instruction, rehearsal, training, shows, competitions and performances at **emjæz DANCE STUDIO, LLC** and/or performance spaces and/or any other venues, whether caused by the negligence, breach of contract, or otherwise, and whether for bodily injury, property damage or loss or otherwise, which student may have against **emjæz DANCE STUDIO, LLC** its owners, officers, directors, shareholders, employees and agents, and their heirs, executors and administrators.

The Student/Parent/Legal Guardian is responsible for informing **emjæz DANCE STUDIO, LLC** in writing of all pertinent information including any special needs, medical issues, family issues or physical limitations. Student/Parent/Legal Guardian requests and authorizes that in his/her absence, the student may be admitted to any hospital or medical facility for diagnosis and treatment and authorizes physicians, or other such licensed professionals, to perform any diagnostic procedures, treatment procedures, operative procedures and x-ray treatment of the student. There is no guarantee as to the results of examination or treatment. Parent/Legal Guardian authorizes **emjæz DANCE STUDIO, LLC** its owners, members, board of directors, and all employees and agents of these parties to act for the student according to their best judgment in providing or arranging for emergency care in any emergency situation requiring medical attention.

All students shall be covered by their family's insurance, if any. It is understood that **emjæz DANCE STUDIO, LLC** does not maintain insurance coverage on students. It is understood that the students own policy, if any, is the only source of medical insurance coverage. My medical insurance is offered through:

Insurance Company Name

Policy/ID Number

I, the undersigned, have read this release/authorization and understand all of its terms. I execute it voluntarily and with full knowledge of its legal significance. I have executed the release/authorization on the day and year stated above.

**Signature of Student (Ages 18+)/Parent/
Legal Guardian**

Home Phone #

Work Phone #

Cell Phone #

Please list any medical information that the studio should be aware of (allergies, physical limitations, etc.):

emjaez DANCE STUDIO LLC

Parent/Guardian Agreement

STUDENT RELEASE/PICK-UP

I understand that all students are to remain inside of emjaez DANCE STUDIO LLC for pick up by a Parent/Guardian.

_____ I authorize my child to be released from emjaez DANCE STUDIO LLC without an accompanying Parent/Guardian after classes. I realize by doing so I assume the risk and agree that emjaez DANCE STUDIO LLC shall not be liable in any way for injuries or accidents sustained outside of emjaez DANCE STUDIO LLC. It is your responsibility to inform your child of this procedure.

PAYMENT AGREEMENT

Please Read and Initial:

_____ There is a one time per year non-refundable registration fee due at time of registration along with the non-refundable first month of tuition, for each class you are registering for.

_____ Automatic tuition payments using a Visa, MasterCard, Discover or American Express will be taken directly from your account on the first of each month.

_____ For anyone not on auto-pay, a credit card must be kept on file. Tuition is due on the 1st with a 10-day grace period. If payment is not received by the 10th, the credit card on file will be charged on the 11th. A \$15 late fee will be applied to the account if payment is not successful by the 11th.

_____ Post-dated checks will NOT be accepted. The office cannot be responsible for holding post-dated checks. If the date on the check is past the 10th, the late fee will be applied. If the date on the check is post-dated earlier, but dropped off after the 10th, the late fee will be applied.

_____ There will be a \$30 fee added to your account for all returned checks. Please note that monthly statements will NOT be mailed.

_____ A \$15 late fee will automatically be assessed for all payments received after the 10th of the month.

_____ If an account is past due more than 60 days, the student may be asked to sit out of class. If an account is past due more than 90 days, the student may not be eligible to participate in the annual show.

_____ I understand that I am purchasing a space in the class for the 2020-2021 dance season, beginning September 19, 2020 concluding with the tentative show date of June 6, 2021. If my child withdraws from a class, tuition fees will continue to be added to my account until the studio receives an email/written letter of withdrawal. I am responsible for payment of tuition until I officially withdraw from the class or for the remainder of the 2020-2021 dance season if the withdrawal is after December 31, 2020.

_____ I understand that there are NO refunds, adjustments or pro-rating given for discontinued or missed classes. If my child withdraws after the first of the month, I am responsible for payment for the remainder of the month. If registering mid-month, I am responsible for the whole month of tuition. If I choose to pay by semester or full year and withdraw, a 20% service charge will be deducted from my refund. If you are enrolled in multiple classes, semester refunds will be credited to your account.

_____ I understand there are NO refunds given for the first payment of tuition and it may not be applied to any other month or transferred to another class.

_____ I understand there are no withdrawals or refunds given for any reason after December 31, 2020 and that I shall be responsible for tuition for the remainder of the 2020-2021 dance season even though my child has ceased from participating in classes (this includes withdrawal for any and all reasons including but not limited to time conflicts with other activities, lack of interest, etc.).

_____ I understand I am automatically signed up for Remind to receive studio notifications. You will need to approve it once you receive the notification on your phone.

_____ You may cancel this contract for any reason at any time prior to midnight of the third business day after the date on which the first service under the contract is available. The registration fee however, is non-refundable.

_____ I have read and understand the policies of emjaez DANCE STUDIO LLC as stated in the 2020-2021 studio brochure.

Failure to pay your bill: Financial hardships may occur to any of us. These hardships should be discussed with the owner so that necessary arrangements can be made. Non-payment may result in collection efforts or legal action. Of course, this is a regrettable action only used when other efforts have failed. If an account is sent to collection, you will also be held financially responsible for all collection fees, including but not limited to attorney fees, administrative time, court costs, etc., assessed to emjaez DANCE STUDIO LLC.

Miscellaneous: No failure delay by emjaez DANCE STUDIO LLC in enforcing any right under this agreement will operate as a waiver of that right under this agreement or prevent emjaez DANCE STUDIO LLC from exercising any other right under this agreement. No amendment or waiver of any term of this agreement will be effective unless it is in writing. If any provision of this agreement is found to be invalid or unenforceable, it will be considered separate and severable from this agreement and will not affect the validity of enforceability of any other term of this agreement. This agreement will be governed by the laws of the State of Ohio.

I, the undersigned, have read this release/agreement and understand all of its terms. I execute it voluntarily and with full knowledge of its legal significance.

Parent/Legal Guardian Name: _____

Parent/Legal Guardian Signature: _____

Date: _____

Signature of Owner: _____

Date: _____



Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

emjaez Dance Studio, LLC has put in place preventative measures to reduce the spread of COVID-19; however, emjaez Dance Studio, LLC cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending emjaez Dance Studio, LLC could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending emjaez Dance Studio, LLC and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at emjaez Dance Studio, LLC may result from the actions, omissions, or negligence of myself and others, including, but not limited to, emjaez Dance Studio, LLC employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at emjaez Dance Studio, LLC or participation in emjaez Dance Studio, LLC classes. On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless emjaez Dance Studio, LLC, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of emjaez Dance Studio, LLC, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any emjaez Dance Studio, LLC program, activity, class or event.

Mask Policy

It is the State's current policy that masks are to be worn by anyone entering a public-premises (emjaez Dance Studio, LLC) and we will adhere to this policy. All staff, instructors, dancers and Parent/Guardians must wear masks at all times, including the classroom. Dancers will be given mask breaks during class, while physical/social distancing. Should the mandate be lifted, we will revisit this mask policy.

I, the undersigned, have read this release/authorization and understand all of its terms. I execute it voluntarily and with full knowledge of its legal significance.

**Signature of Student (Ages 18+)/Parent/Legal
Guardian**

Date

emjaez DANCE STUDIO
Photo/Video/Audio Consent Form

I, the undersigned, do hereby consent to the use by **emjaez DANCE STUDIO LLC** of my image, my child's or ward's image, voice, or both, in video, photograph, audio tape; and any video, photograph, or audio tape, reproduced either in whole or in part from the video, photograph, or audio tape regardless of whether these materials are used for fundraising, advertising, publicity, or any other purpose on behalf of **emjaez DANCE STUDIO LLC** and its affiliates/contractors.

In addition, I waive all claim to compensation or damages based on the use of said image or voice, or both, by **emjaez DANCE STUDIO LLC** and its affiliates/contractors. I also waive any right to inspect or approve the finished photography, video, or audiotape.

I agree that all such portraits, pictures, photographs, video and audio recordings and any reproductions thereof, all plates, negatives, recording tape, and digital files shall remain the property of **emjaez DANCE STUDIO LLC**, unless otherwise noted.

I agree to not post any pictures, video or audio recordings from that of **emjaez DANCE STUDIO LLC** property, video choreography, music or performances on sites such as youtube, facebook, twitter, instagram, snapchat or any other social media site. I understand posting of such pictures, video and audio is a violation of copyright laws and I will solely be responsible for any damages or claims arising. Furthermore, I agree to hold harmless **emjaez DANCE STUDIO LLC**, its affiliates/contractors and waive all claims for damages resulting from that of parent, student or community members posting pictures, video or audio on sites such as facebook, youtube, twitter, instagram, snapchat or any other social media site.

I understand that this consent is perpetual, that I may not revoke it, and that it is binding on my heirs and assigns. I warrant that I am at least 18 years of age and have read this consent form and fully understand its contents.

Name of Student(s) Attending

Signature of Student/Parent/Legal Guardian

Date

Printed Name of Student/Parent/Legal Guardian