



Class Registration

Please fill in and return this form (both sides) along with a \$25 per family registration fee. The form and fee should be sent to Dance Workshop Caste Village Shoppes, 5301 Grove Road, Pittsburgh, PA 15236. You will be mailed a recommended class schedule along with the appropriate tuition fees. The tuition will be based on the number of hours of instruction per week. The first month's tuition is due before the first class. Please note: email address that you provide should be for the parent responsible for studio communications.

Student Name _____ Age _____
Parent's Name _____
Address _____ Zipcode _____
1st Phone # : _____ 2nd Phone # : _____
Emergency Name and Phone _____
Student Birth Date _____ Parent's Email _____
School _____ Grade _____

All Students:

I prefer these days and times _____

New Students:

Previous Dance Experience _____
Number of Years _____ Studio _____
Style(s) of Dance _____

Class Preference:

Toddler Time Princess Ballerinas Super Heroes Tiny Tumblers

Class Preference: Specialized classes in specific dance types

ballet pointe jazz lyrical
 tap hip hop acro/gym private lesson

Preferred Day(s) of the Week _____

How did you hear about us? Friend Mailing Website Studio Events Social Media

Do you use Facebook/Instagram? yes no

Medical/Behavioral Problems/Allergies/Special Needs: _____

Office Use Only:

Class 1: _____ Class 2: _____ Class 3: _____
Class 4: _____ Class 5: _____ Class 6: _____

Tuition: *Auto* Monthly _____ Semi-Annual _____ Annual _____

Discounts Applied: Sibling _____

Amt Paid: Registration: _____ Check # _____ Date Pd: _____ Tuition: _____ Check # _____

Please complete the back of this page

Release From Liability and Payment Terms

We, the undersigned parents and/or guardians of _____, a minor, upon signing this agreement do hereby acknowledge that the activities that I have requested my daughter/son participate in may be stressful on the body and carry with them the risk of physical injury. On behalf of my child and her/his parents and/or legal guardians, I assume the risk and agree that the Dance Workshop LLC, Megan Kamberis, Directors, Faculty, assistants and any of the chaperones and agents shall not be liable in any way for any injuries sustained, sickness, infectious illness and or virus, Covid-19, or loss of property during attendance at the dance studios, on line virtual classes, performances or any of its related functions, as a participant or an observer on or off the premises.

We understand that Dance Workshop from time to time, produces promotional material about its programs. We understand that as a participant the above mentioned minor may be included in video tape or photographs taken at the studio or a performance venue. We hereby grant to Dance Workshop, its successors, assignees, licensees, sponsors, and television networks and all other commercial exhibitors, the exclusive right to photograph and or video tape participant and further utilize participant's name, face, likeness, voice and appearance, as part of the program, and in advertising and promoting the program, without reservation or limitation. This explicitly allows use in any Social Media campaign or posting, such as Facebook, Instagram, Twitter, or the like. In granting this license, I understand that Dance Workshop is under no obligation to exercise any of its rights, licenses and privileges herein granted by participant.

My child has permission to receive any necessary emergency medical care. **Students must be covered by their own family health insurance. It is understood that the student is covered by the parent/legal guardian and or their own personal health insurance policy. It will be the only source for payment for any medical services, out of pocket expenses, and pain and suffering that may be incurred or result from treatment due to the injury or illness.**

I understand that the tuition is based on the dance season and is determined by the total number of scheduled classes to be held in the studio or on line virtual class instruction. Tuition can be paid annual, semi-annual, or by the month. If paying by the month, tuition payments are the same and equal amount paid over the year regardless of the number of scheduled classes during that month. I agree to these monthly payments unless a written notice of withdrawal from classes is received two weeks before tuition is due. I understand the tuition is non-refundable for any reason including an interruption in classes due to circumstances outside of the studio's control. There is a \$10 late fee if tuition is not received by the 10th of each month. If tuition is not received by the 10th of the month the credit card on file will automatically be charged. Any account that becomes delinquent, the student will not be permitted to attend further classes or participate in the recital until the account is brought current. I understand all recital fees are non-refundable.

I have read and understand all Studio policies including the Health and Safety protocol.

Parent/Guardian Signature _____ Date _____

Place of Employment: Mother _____ Phone _____

Father _____ Phone _____

Medical Insurance Provider _____ ID/Agreement Number _____



Acknowledgement of Dance Workshop Health and Safety Protocol

Dance Workshop has a health and safety protocol in place that includes:

- 1. Studio-** Professional Deep cleaning from Fagan Sanitary Supply, Carpets cleaned by Stanley Steemer, HVAC maintained by Kesco, Air Puifiers, Touchless soap dispenser, Touchless hand sanitizer, Touchless garbage can, and Touchless paper towels. Customized studio signage and place markings.
- 2. Sanitizer-** Students must use hand sanitizer before participating in class. Hand sanitizer will be available in each room and front desk. Students will be able to use it frequently. If you'd prefer your own, students are permitted to bring it in their dance bag. Our sanitizer does contain at least 70% alcohol.
- 3. Surface Cleaning-** As always, the studios and bathroom will be cleaned and disinfected in between classes and daily, wiping down frequently touched surfaces. Weekly deep cleaning will be implemented.
- 4. Student and Staff Wellness-** If you are experiencing symptoms of COVID-19 or any sickness (stomach and or body aches, fever, coughing/sneezing sore throat, diarrhea, or vomiting), or have come in contact with a family member or anyone who is sick or experiencing symptoms, YOU SHOULD NOT COME TO THE STUDIO. Do not attend classes if you have tested positive for Covid-19 or have been advised to quarantine.

By registering your child at the studio you agree when having your dancer participate that they are without any symptoms of the coronavirus or any other illness and that you will abide by following the Dance Workshop rules and regulations for the well-being of our students, staff and families. Dance Workshop reserves the right to decline instruction if a client refuses to comply with the studio's safety precautions.

Please know that your health and safety are most important to us.

ASSUMPTION OF RISK: I am aware 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 Dance Workshop and that such exposure or infection could result in personal injury, illness, permanent disability, and death. These services are of such value to me [and/or to my children,] that I accept sole responsibility the risk of being exposed to or contracting COVID-19, any sickness, infectious illness, and or virus in order to utilize Dance Workshop's services and premises in person rather than arranging for an alternative method of enjoying the same services virtually. I knowingly and freely assume all such risks, both known and unknown, and even if arising from the negligence of myself or others actions including, but not limited to owner(s), officers, staff, teachers, assistants, volunteers, and participants and their families of Dance Workshop.

WAIVER OF LAWSUIT/LIABILITY: By signing this waiver I agree to release and discharge all/any claims of liability on my behalf, spouse, legal guardian, and on behalf of my children as well the covenant not to sue/any legal actions or hold Dance Workshop and its owner(s), officers, staff, teachers, assistants, volunteers, participants and their families, responsible of and from the claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising in connection with exposure, infection, and/or spread of COVID-19 related to utilizing Dance Workshop's services and premises. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of Dance Workshop, it's owner(s), officers, staff, teachers, assistants, volunteers, and participants and their families whether a Covid-19 infection occurs before, during, or after participation in Dance Workshop class, performance, activity or event.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE:

Print Dancer (s) Name _____

I am the parent or legal guardian of the minor named above. I have the legal right to consent to and, by signing below, hereby do consent to the terms and conditions of this Release.

Parent/Legal Guardian Signature _____ Date _____

Name Printed _____