

**ASPIRATIONS DANCE COMPANY 2024/25
PARENT/GUARDIAN WAIVER**

GENERAL POLICIES

1. All class times are clearly marked in the schedule, please do your best to be on time to avoid class interruptions
2. Proper dance shoes are required at ALL times. Store bought ballet slippers & socks are NOT allowed
3. We reserve the right to cancel a class at any time due to minimum requirements
4. We reserve the right to combine classes if necessary
5. Tuition Fees are based on weekly classes for a monthly total
In the event of a Studio Closing, students will be given a make-up day
6. Refunds will NOT be issued for missed lessons, makeup classes can be done within the same month in any other class. 2 MAX per month.
7. Registration is accepted on a space available basis
We are NOT a babysitting service for your child's safety & ours. When your child is finished with class he/she must be picked up and not left to roam the studio. A (10) min time window is allowed for lateness. If they're waiting in between enrolled classes then it is acceptable. Any lateness after (10) min you will be charged \$1.00 per min.
8. Aspirations will be closed on the following Holidays: Labor Day, & Memorial Day. We take a full week break for Thanksgiving Week, & Spring Break Week and a full (2) week break for Christmas & New Years. TUITION is the SAME PRICE EACH MONTH.

MONTH TO MONTH ENROLLMENT POLICY

1. Classes are month to month. Meaning classes continue until a withdrawal form is submitted prior to the next month session.
2. By signing this waiver you authorize Aspirations Dance Company to charge your credit/debit card on file if tuition becomes past due over (30) days and with a \$25.00 monthly late fee.
3. Newly registered participants will be pro-rated based on the day of registration.
4. Cash, Check, or Credit Card tuition payments MUST be submitted to the front desk, or over the phone prior to the 10th of each month. After the 5th a \$25.00 late fee will automatically be applied.
5. If a credit or debit card absolutely cannot be given participants are required to pay a (1) month tuition deposit, which can be used as a final month payment, if a withdrawal form is submitted.
6. All payments must be made with a late fee by the following month payment or your class spot may be forfeited.
7. If you wish to Drop a class a "DROP FORM" must be filled out by a parent, by the 15th of the month prior to the month you want to drop. NO REFUNDS - NO EXCEPTIONS

PHOTO RELEASE

I am aware that individual and group publicity photos and videos are taken by the Studio from time to time and in consideration for my or my children(s) participation, I hereby grant the Studio, it's legal representatives and assigns (including any agency, client or publication) permission for my child (ren)'s likeness to be used in Aspirations Dance Company publicity or advertising, without payment or consideration. I understand that these materials become the property of the studio. I hereby irrevocably authorize the Studio to edit, alter, copy, exhibit, publish or distribute this photo for the purposes of publicizing the Studio's program and services.

In addition, I waive the right to inspect or approve finished product, including written or electronic copy, wherein my or my child (ren)'s likeness appears. Additionally, I waive my right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release forever discharge the Studio from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on me or my child (ren)'s behalf or on behalf of my estate have or may have by reason of this authorization.

MEDICAL AUTHORIZATION

I have noted any medical/health problems of which the staff should be aware in the attached registration form.

In the event of an accident or emergency, I hereby authorize myself or my child(ren) to be transported to a hospital for medical treatment and I hold the Studio and its representatives harmless in the execution of such. Additionally, I hereby agree to individually provide for all medical expenses which may be incurred by myself or my child(ren) because of any injury sustained while participating at or for the Studio.

PARENT/GUARDIAN WAIVER

In consideration for allowing the Participant(s) to enroll in classes offered by Aspirations Dance Company, which shall include it's directors, officers, owners, employees, agents, guides, and volunteers, and to participate in the activities provided or arranged by the Studio, the Undersigned, individually and on behalf of the Participant(s), and our general representatives, heirs, next-of-kin, spouse, and assigns, hereby:

1. Acknowledges that dance & tumbling lessons and all associated activities, and use of the Studios facilities, equipment and gear (collectively, "Activities"), may be dangerous and involve risks that may cause serious injury and in some cases death, because of the hazards including without limitation:
 - 1.1 Accidents involving head or spine injuries or other bodily injuries.
 - 1.2 Contact with other students, Studio Personnel, or individuals
2. Voluntarily assumes the risk and danger of injury or death inherent in the participation of activities.
3. RELEASES, DISCHARGES, AND PROMISES NOT TO SUE the Studio for any loss, liability, damage, or cost whatsoever arising out of the related to any loss, damage or injury (including death) to the Undersigned, the Participant(s) or their personal property.
4. RELEASES the Studio from any claim of negligence in connection with the Participant's (s)' participation in the Activities, including, but not limited to training, stretching, tumbling, maintenance, care, equipment or gear, condition of facilities, or supervision of the Participant(s) or the other participants.
5. INDEMNIFIES, SAVES AND HOLDS HARMLESS the school from and against any loss, liability, damage, or cost arising out of or in any way connected with Participant's(s)' participation in the activities, used of the school's facilities, equipment and gear, or any acts or omissions of the Participant(s), the other participants, Studio personnel, or any other person or entity.
6. Agrees to abide by and follow any instructions given or rules established by the Studio regarding the activities or Participant's(s)' use of the facilities, equipment, or gear.
7. Cameras and videos are NOT permitted in the dressing rooms, locker rooms, or bathrooms. Cameras and videos are permitted by use of only the parent/guardian.
8. Expressly agrees this Release is governed and is intended to be as broad and inclusive as permitted, by State Law. If any portion of this Release is declared invalid, illegal, or unenforceable, the validity, legality, and enforceability of the balance of the Release shall not be affected or impaired in any way and shall continue in full legal force and effect.
9. Understand and agrees the Release is a contract. If a lawsuit or proceeding is filed against the Studio for any injury or damage in breach of this contract, the Undersigned will pay all reasonable attorney's fees, costs and expenses incurred by the Studio in defending the lawsuit or proceeding, including attorney's fees, costs and expenses incurred in collecting upon any judgement, order, or award.

RELEASE, INDEMNIFICATION AND COVENANT TO SUE

In consideration for the minor(s) identified in this registration from being permitted by the Studio to participate in the Activities, and to use the Studio's facilities, equipment and gear, I agree to the following waiver, release and indemnification:

I HAVE READ THE ABOVE POLICY, RELEASE AND WAIVER, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT. I UNDERSTAND IT IS THE SCHOOL'S INTENT IN WHICH I CONCUR, TO AVOID ANY AND ALL LIABILITY, LOSS, CLAIMS DEMANDS OR DAMAGES, WHETHER KNOWN OR UNKNOWN, FORESEEN OR UNFORESEEN BY OR THROUGH ME, THE PARTICIPANT(S) OR ANY THIRD PARTY, ARISING OUT OF OR RELATING TO THE PARTICIPANT'S (S)' PARTICIPATION IN THE ACTIVITIES OR USE OF THE SCHOOL'S FACILITIES, EQUIPMENT OR GEAR, OR MY ENTERING THE SCHOOL'S PREMISES, OR USING IT'S FACILITIES, EQUIPMENT OR GEAR. I FULLY REALIZE PARTICIPANT(S) MAY SUSTAIN DAMAGES, INJURIES, LOSSES OR LIABILITY RESULTING DIRECTLY OR INDIRECTLY FROM PARTICIPATION IN THE ACTIVITIES, OR USING THE STUDIO'S FACILITIES, EQUIPMENT OR GEAR. BY EXECUTING THIS CODUMENT, I FULLY INTEND, INDIVIDUALLY AND ON BEHALF OF THE PARTICIPANT(S), TO RELEASE THE STUDIO FROM ANY AND ALL SUCH DAMAGES, INJURIES, LOSSES, OR LIABILITIES WHETHER ARISING FROM NEGLIGENCE OR OTHERWISE.

Signature:	Date:
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