

YOGAGÉ REGISTRATION FORM

Each student will require a separate form. Please complete and return along with Waiver of Liability and Photographic Release.

DATE OF REGISTRATION: _____

STUDENT NAME: _____

D.O.B: _____

PARENT(S)/GUARDIAN(S): _____

ADDRESS: _____

HOME #: _____

WORK#: _____

CELL#: _____

EMAIL(S): _____

EMERGENCY CONTACT: _____

HOME#: _____

WORK#: _____

CELL#: _____

PLEASE LIST ANY HEALTH CONCERNS: _____

PLEASE LIST THE CLASSES YOU WOULD LIKE TO ENROL IN (Weekday/Class Description/Time):

TERM: 1 2 3

First term fees must be submitted upon registration. Please indicate number of terms you would like to enrol in. All subsequent term fees must be paid prior to new beginning of new term. Fees are non-refundable, except in situations such as illness or injury with doctor's advisory.

WAIVER OF LIABILITY

This agreement releases Lindsay Storms/Yogagé and any of its contracted employees from all liability relating to injuries that may occur while on or off location at Yogagé. By signing this agreement, I agree to hold Lindsay Storms/Yogagé entirely free from any liability, including financial responsibility for injuries incurred, regardless of whether injuries are caused by negligence. I also acknowledge the risks involved in Dance Classes, Camps and Outdoor Activities. These include but are not limited to any and all types of injury. I swear that I am participating voluntarily, and that all risks have been made clear to me. Additionally, I do not have any conditions that will increase my likelihood of experiencing injuries while engaging in this activity. By signing below I forfeit all right to bring a suit against Lindsay Storms/Yogagé for any reason. In return, I will receive Dance Training. I will also make every effort to obey safety precautions as listed in writing and as explained to me verbally. I will ask for clarification when needed.

Photographic Release:

I hereby give permission for images of my child captured during Yogagé's regular and special events via video and photo to be used solely for the purpose of Yogagé's promotional material and publications (i.e. Website, Facebook, Twitter) and waive any rights of compensation or ownership thereto.

YES: NO:

I, _____, (parent or guardian if participant is under 18 years of age) fully understand and agree to the above terms.

Signature: _____