

Forte Academy of Dance & Music - 2019-20 Registration Form

Please complete all items!

Parent/Guardian (or student if over the age of 18):

Last Name _____ First Name: _____

Street Address: _____

City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____ Relationship to student(s): _____

Additional parent/guardian (if applicable):

Last Name _____ First Name: _____

Street Address (if different from above): _____

City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____ Relationship to student(s): _____

Students in Household (including students over the age of 18):

1) Last Name _____ First Name: _____

Date of Birth: _____ Age on Sept. 3, 2019: _____ Sex: M F Allergies/Medical Issues: _____

2) Last Name _____ First Name: _____

Date of Birth: _____ Age on Sept. 3, 2019: _____ Sex: M F Allergies/Medical Issues: _____

3) Last Name _____ First Name: _____

Date of Birth: _____ Age on Sept. 3, 2019: _____ Sex: M F Allergies/Medical Issues: _____

4) Last Name _____ First Name: _____

Date of Birth: _____ Age on Sept. 3, 2019: _____ Sex: M F Allergies/Medical Issues: _____

5) Last Name _____ First Name: _____

Date of Birth: _____ Age on Sept. 3, 2019: _____ Sex: M F Allergies/Medical Issues: _____

6) Last Name _____ First Name: _____

Date of Birth: _____ Age on Sept. 3, 2019: _____ Sex: M F Allergies/Medical Issues: _____

Emergency Contacts (DO NOT LIST PARENT/GUARDIAN):

1) Last Name _____ First Name: _____

Phone: _____ Relationship to student(s): _____

2) Last Name _____ First Name: _____

Phone: _____ Relationship to student(s): _____

How did you hear about Forte Academy of Dance & Music? (circle all that apply)

Website Facebook Friend/Relative Coupon Book/Mailer Saw studio while driving by

Other (please specify): _____

Forte Academy of Dance & Music - Liability Waiver 2019-20

I/we realize that participation in dance & music classes and activities could involve some possible personal injury. Despite precautions, accidents and injuries may occur. By signing this release form, I/we (the student and parent/guardian) assume all risks related to the use of any and all spaces used by Forte Academy of Dance, LLC.

I/we agree to release and hold harmless Forte Academy of Dance, LLC including its teachers, students, staff members, and facilities used by both entities from any cause of action, claims, or demands now and in the future. I/we will not hold Forte Academy of Dance, LLC liable for any personal injury or any personal property damage, which may occur on the premises before, during or after classes. Furthermore, I/we agree to obey the class and facility rules and take full responsibility for my/our behavior in addition to any damage I/we may cause to the facilities utilized by Forte Academy of Dance, LLC.

I/we understand that in the event that I/we should observe any unsafe conduct or conditions before, during or after my/our classes, I/we agree to report the unsafe conduct or conditions to a director, instructor or staff member as soon as possible.

Forte Academy of Dance & Music - 2019-20 Photo/Image Release and Waiver

I hereby give Forte Academy of Dance, LLC, its assigns, licensees and legal representatives the irrevocable right to use my/our name(s), photograph(s), image(s), audio recording(s), video recording(s), and likeness ("My Image"), or that of my child(ren)'s ("My Child(ren)'s Image"), in all forms and manner including but not limited to publication on Internet Web Sites, broadcasts and any other publications as released to or by Forte Academy of Dance, LLC. I understand that Forte Academy of Dance, LLC cannot control unauthorized use of My Image or My Child(ren)'s Image by persons not associated with Forte Academy of Dance, LLC once My Image or My Child(ren)'s Image has been published. I hereby forever waive any right to inspect or approve any publication of My Image or My Child(ren)'s Image by Forte Academy of Dance, LLC. I have carefully reviewed and understand the above provisions and agree to be bound by them. I voluntarily and irrevocably give my consent and agree to this Release and Waiver.

Name of Student(s): _____
(Please print)

(Please print)

(Please print)

(Please print)

(Please print)

I have read the liability and image waivers above, as well as the studio policies, and agree to comply with the contents.

PRINT NAME (of parent/guardian (if student(s) is a minor): _____

SIGNATURE (of parent/guardian if student(s) is a minor): _____

DATE: _____

Street Address: _____ **City:** _____ **Zip:** _____

Phone: _____ **E-mail:** _____

Forte Academy of Dance & Music
Auto-Pay Authorization Form
THIS FORM IS REQUIRED TO ENROLL

PLEASE NOTE: WE DO NOT ACCEPT AMERICAN EXPRESS!

Household last name (student last name):

Card Number:

Name as it appears on card:

Expiration:

____/____
MM YYYY

Code on back of card:

Competitive Team:

Acknowledgement that competition entry fees and costume/ accessory/rhinestone/jewelry/shoe fees will be included in my automatic payment on the deadlines:

I hereby authorize automatic monthly payments to Forte Academy of Dance & Music. I understand that all payments will be charged on the deadlines without exception. If my card information changes, I will notify the studio as soon as possible.

Signature _____

To be completed by studio:

Circle One: New auto-pay account Updated card

Number of recurrences: _____

Starting date: _____