

Today's Date _____ New / Referred by _____ or Returning

Student's Name (First & Last) _____

Address _____

City, Zip _____

Email _____ Phone _____

For Students 18 & Under

Date of Birth _____ School _____ Grade _____

Parent 1 Info: Name _____ Employer/Title _____

Email _____ Phone _____

Parent 2 Info: Name _____ Employer/Title _____

Email _____ Phone _____

Who should receive information regarding the student? (circle one): Parent 1 Parent 2 Both

List any previous relevant to the area in which your child will be studying including how long each subject was studied and where.

Any serious injuries _____

Allergies/Medical Issues _____

In case of emergency, please contact (circle one): Parent 1 Parent 2 Both

Please Initial if you have received:

_____ Student Guidelines _____ Uniform List _____ Withdrawal Form _____ Calendar

Waiver & Release: I agree to indemnify and hold MUSE Arts, Inc and its employees and officers harmless from and against any and all liability for any injury that may be suffered by the aforementioned individual arising out of or connected to any participation with activities at MUSE. I further agree to indemnify and hold MUSE employees and officers harmless for any losses or damages occurring as a result of the aforementioned individual's participation in the event.

I grant MUSE Arts, Inc the use of photographs of myself and or my child for publicity purposes. As a legal parent or guardian of this child, I hereby verify by signature above that I fully understand and accept each of the above conditions for permitting my child to participate in classes, camps, events and any other activity conducted by MUSE.

Signature X _____ Date: _____

Parent 1 Parent 2

**Both signatures are required if student lives in two separate households*