

THE DANCEHOUSE

Youth Classes at The Dancehouse

Web Contacts

Web: www.The-Dance-House.com
www.Facebook.com/TheDanceHouseSD
www.yelp.com/biz/the-dancehouse-san-diego
www.instagram.com/thedancehouse
<https://twitter.com/dancehousesd>
<https://www.youtube.com/user/dancehousesd>
<https://plus.google.com/+DancehouseSD>
Snapchat: thedancehousesd
www.linkedin.com/in/thedancehouse

Phone Contacts

Director: Jaami Waali (619) 322-1015
Co-Director: Angel Villalobos (858) 752-0265
Email: Info@the-dance-house.com

Address

Physical: 2180 Chatsworth Blvd.
San Diego, CA 92107
Mailing: PO Box 153303
San Diego, CA 92195

WAITING LIST REQUEST

Class Interest:

- _____ 1. Urban Dance (Hip Hop)
- _____ 2. Breakin' (Break Dancing)
- _____ 3. Contemporary (Jazz & Lyrical Fusions)
- _____ 4. Express (Guided Freestyle Class)
- _____ 5. Polynesian (Tahitian)

Student Dance/Movement Experience: _____

Days and Time Open/Available: _____

Dancer's Full Name: _____ School Year _____ Birth Date _____

Address: _____ City _____ State _____ Zip _____

Parent/Guardian (1) Name: _____

Phone #: _____ Email: _____

Parent/Guardian (2) Name: _____

Phone #: _____ Email: _____

REGISTRATION

Shirt Size: _____ Pants Size: _____

List any previous injuries or allergies: _____

List any medications your child is currently taking: _____

Is there anything else we need to know that might impact your child's health and performance in class?

PARENT/GUARDIAN PRINT: _____ **DATE:** _____

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____

Media Release

I give permission for still photographs and/or video of (name) _____, to be taken by The Dancehouse and/or their staff for the use of Printed marketing purposes (including, but not limited to, brochures, handbooks, postcards), The Dancehouse websites, Video Reel (in efforts to advertise our program), Newspapers and business newsletters (to keep the public informed of our services), and any public form of media to represent our companies, and I waive my right to compensation in regard thereto.

PARENT/GUARDIAN PRINT: _____ **DATE:** _____

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____

WE HAVE READ, UNDERSTOOD, AND FULLY AGREE TO THESE GUIDELINES

Participant Waiver

I HEREBY DECLARE THAT I AM AWARE OF THE INHERENT HAZARDS OF PHYSICAL ACTIVITY, INCLUDING, BUT NOT LIMITED TO, DANCING.

I understand and agree that neither The Dancehouse (including any of their affiliates or subsidiaries), and any of their respective employees, officers, agents, or assigns, (hereinafter referred to as "Released Parties"), may be held liable or responsible in any way for any injury, death or other damages to me or my family, heirs, or assigns that may occur as a result of my participation in this activity or as a result of the negligence of any party, including the Released Parties, whether passive or active. I understand that physical activity involves certain inherent risks. Knowing of these inherent risks, I still choose to proceed with this activity.

I declare that I am in good mental and physical fitness, and that I am not under the influence of alcohol, nor am I under the influence of any drugs that are contraindicatory to participation in physical activity. If I am taking medication, I declare that I have seen a physician and have approval to participate while under the influence of medication/drugs.

I understand that the activities in which I am going to engage are physically strenuous and that I will be exerting myself and that if I am injured as a result of heart attack, panic, hyperventilation, etc., that I assume the risk of said injuries and that I will not hold the Released Parties responsible for the same.

In consideration of being allowed to participate in these activities, I hereby personally assume all risks in connection with said activities for any harm, injury or damage that may befall me while I am a participant, including all risks connected therewith, whether foreseen or unforeseen.

I further save and hold harmless Released Parties from any claim or lawsuit by me, my family, estate, heirs, or assigns, arising out of my participation in these activities, including both claims arising during the activities or after I complete the activities.

I further declare that I am of lawful age and legally competent to sign this liability release, or that I have acquired the written consent of my parent or guardian.

I understand that the terms herein are contractual, not a mere recital, and that I have signed this document of my own free act.

IT IS MY INTENTION OF THIS INSTRUMENT TO EXEMPT AND RELEASE THE RELEASED PARTIES AND ALL RELATED ENTITIES AS DEFINED ABOVE, FROM ALL LIABILITY OR RESPONSIBILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH, HOWEVER CAUSED, INCLUDING BUT NOT LIMITED TO THE NEGLIGENCE OF THE RELEASED PARTIES, WHETHER PASSIVE OR ACTIVE. I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND ASSUMPTION OF RISK BY READING IT BEFORE I SIGNED IT ON BEHALF OF MY HEIRS AND MYSELF.

PARENT/GUARDIAN PRINT: _____ **DATE:** _____

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____

I HAVE READ, UNDERSTOOD, AND FULLY AGREE TO THESE GUIDELINES