

# Elite Dance by Damian

## 2017 Summer Intensive Registration Form

**Student Name** \_\_\_\_\_ **Age** \_\_\_\_  
**Date of Birth** \_\_\_\_\_ **# of Years Dancing** \_\_\_\_  
**Home Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_ **Zip Code** \_\_\_\_  
**Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_  
**Emergency Contact** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Parents Names** \_\_\_\_\_  
**E-Mail Contact (mandatory)** \_\_\_\_\_  
**Medical Conditions or Allergies** \_\_\_\_\_

I AGREE THAT MY CHILD IS COVERED EXCLUSIVELY BY INSURANCE AND I AM FULLY RESPONSIBLE FOR ALL MY CHILD'S PAYMENTS  
Parent  
Signature \_\_\_\_\_ Date \_\_\_\_\_

I HAVE READ ELITE DANCE BY DAMIAN INC. POLICIES AND PROCEDURES IN THEIR ENTIRETY, UNDERSTAND THEM, AND AGREE TO COMPLY WITH THEIR CONTENTS. I ACKNOWLEDGE AND UNDERSTAND THAT UPON EDBD'S ACCEPTANCE OF THIS REGISTRATION, DANCERS ARE ENROLLED AND FINANCIALLY RESPONSIBLE FOR TUITION. ANY AND ALL TUITION PAYMENTS ARE NON-REFUNDABLE FOR ANY REASONS.

I HEREBY RELEASE AND REQUEST ELITE DANCE BY DAMIAN INC. TO ACT FOR ME ACCORDINGLY TO THEIR BEST JUDGEMENT IN ANY EMERGENCY THAT MAY REQUIRE MEDICAL ATTENTION TO MY CHILD, AND I HEREBY WAIVE AND RELEASE ELITE DANCE BY DAMIAN INC. AND ALL IT'S INSTRUCTORS AND INDEPENDENT CONTRACTORS FOR ANY AND ALL LIABILITY FOR ALL INJURIES AND ILLNESS WHILE TRAVELING TO AND FROM THE STUDIO, AND WHILE RECEIVING INSTRUCTION AT ELITE DANCE BY DAMIAN INC. FUTHERMORE I UNDERSTAND THAT ALL MEDICAL/DENTAL EXPENSES INCURED WILL BE THE SOLE RESPONSIBILITY OF THE STUDENT OR STUDENT'S FAMILY. I HOLD HARMLESS ELITE CONTRACTORS, OWNERS, AND AFFILIATES FROM ALL LIABILITY ISSUES.

IN LIEU OF A MEDICAL CERTIFICATE SIGNED BY A PHYSICIAN I HAVE NO KNOWLEDGE OF ANY PHYSICAL OR MENTAL IMPARMENT THAT WOULD BE AFFECTED BY THIS NAMED STUDENT'S PARTICIPATION IN THIS PROGRAM WHICH IS OUTLINED IN INFORMATIONAL MATERIAL AT THE STUDIO AND ON THE WORLD WIDE WEB ([WWW.ELITEDANCEBYDAMIAN.COM](http://WWW.ELITEDANCEBYDAMIAN.COM)), WHICH I HAVE READ AND UNDERSTAND.

FUTHERMORE, I UNDERSTAND THAT ELITE DANCE BY DAMIAN INC., RESERVES THE RIGHT TO USE ANY PHOTOGRAPHY, VIDEO, RECORDING OR ANY OTHER RECORD OF EVENT OR CLASS FOR PUBLICITY, ADVERTISING, OR ANY OTHER PROMOTIONAL

PURPOSES. I ALSO UNDERSTAND THAT ELITE DANCE BY DAMIAN INC. IS NOT RESPONSIBLE FOR ANY BELONGINGS LEFT IN STUDIO OR OUTSIDE STUDIO.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Note: Current Competitive Company Students and New Perspective Students (Ages 8-18) intending to participate on the Competitive/Convention Company are Required to attend a minimum of 8 days of Summer Classes.

(Please indicate The Level and circle the Days of Classes you will be attending)  
(Ages 12 and up) 10 Days- \$550.00 8 Days- \$450.00

(Ages 8-11) 10 Days- \$500.00 8 Days- \$400.00

(Ages 5-7) 8 Days- \$175.00 6 Days- \$150.00

Total Summer Tuition Due \_\_\_\_\_ Full Payment + \$10 Non Refundable Registration Fee = Total \_\_\_\_\_ Check# \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_ Form Due with Full Payment/Registration Fee Due by July 1st 2017. Please mail to Elite Dance by Damian 485 Jenny Dr. Gibsonia, PA 15044