



Fall Dance Workshop Registration

Fall Workshop will be held at the Pineville Studio.

Workshop Fee \$125.00

Student Name: _____ Age: _____

Studio: CSDA Other: _____

Teacher's Name (Only Complete if not a CSDA Student): _____

Number of Years of Dance Taken: _____

Parent/Guardian Name: _____

Address: _____

Phone Number: _____

E-Mail: _____

Statement of Release

I am aware that ballet and other dance place unusual stress on the body and can carry with them the risk of physical injury. On behalf of my children, myself, I assume the risk and agree that *Cindy Seaton Dance Academy* shall not be liable in any way for injuries sustained during attendance at the program or any of its related functions. I grant my child or ward permission to participate in the workshop. I hereby release and discharge the workshop, its agents, employees and its officers from all liability for all personal injuries or loss caused by, or arising from participation in the dance workshop. Further, I grant *Cindy Seaton Dance Academy* and its agent's permission to authorize any emergency medical treatment that may be required for my child.

I authorize CSDA to use any photos taken of the above mentioned student taken at the workshop on their internet sites and any print media.

Parent/Guardian Signature

Date

Level: _____

Amount Received: _____ By: _____ Date: _____