

Music In Motion® Dance Academy & Fitness Boutique

PLEASE PRINT LEGIBLY

Participation & Registration Waiver

I agree to abide by the rules and the regulations of the Academy. I guarantee the attendance of the student and the monthly payment of tuition on the first of each month.

I hereby assume responsibility for and risk of damage or injury that may occur to me or the student for whom I am responsible as a participant of Music in Motion Dance Academy (Dance Directions Inc./MIM) & Fitness Boutique and instructors (IN) while touring the facilities, taking class, participating in exercise or using it's equipment, facilities or following its course of instructions in or out of the studio. To my knowledge, there is no medical reason why this student should not participate in the program. Myself and/or my charge will participate at his/her own risk and I hereby release and discharge MIM, all of its associates, owners and agents from all claims, demands, rights or causes of action present and future from responsibility for any loss, claim or injury as a result of his/her participation. I have read, understand and sign the foregoing assumption of risk agreement and release.

NAME OF STUDENT: _____ EMAIL ADDRESS: _____

PARENT SIGNATURE: _____ DATE: _____

EMERGENCY CONTACT NAME: _____ PHONE: _____

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Photo & Video Release Form *

We are excited and honored to feature our talented dancers and community friends in various areas on our website, promotions and social media pages. I hereby grant permission to Music in Motion the rights of my image, and likeness. I understand that my image may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of my image. By signing this release I understand this permission signifies that photographic or video recordings of me may be electronically displayed via the Internet, film, print or promotional settings. There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed. By signing this form I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against any person or organization utilizing this material for educational or promotional purposes.

NAME OF STUDENT: _____

PARENT SIGNATURE: _____ DATE: _____

