

Oakland Ballet School

2017/2018 Annual Registration Level 1A/1B/2

Student's Name: _____ Age: _____ Date of Birth: ____/____/____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Academic School: _____ Grade level: _____

Parent /Guardian's Name: _____ Relationship: _____

Phone: _____ Email: _____

Parent /Guardian's Name: _____ Relationship: _____

Phone: _____ Email: _____

Emergency Contact: (other than parent) _____ Relation: _____

Phone: _____ Allergies/Medical Conditions: _____

New Students: Former Dance School: _____ Years in Ballet: _____

How did you hear about us? _____

New Student Registration Fee* - \$25 Includes students who have been away for 3 or more months, not including summer term. Registration will be complete when registration form, waiver, registration fee, and tuition are submitted. Registration fees are non-refundable upon taking first class. Dancers will not be allowed to take class until everything has been submitted.

Class Selection - Please select one

{ } **Level 1A** (1 class/week) () Thu 4:45-5:45pm / () Sat 10:45-11:45am **Tuition: \$154 due Fall-9/1, 10/1 Spring-1/1, 2/1, 4/1**

{ } **Level 1B** (2 classes/week) **Wed 3:45-4:45pm & Fri 4:30-5:30pm** **Tuition: \$260 due Fall-9/1, 10/1 Spring-1/1, 2/1, 4/1**

{ } **Level 2** (2 classes/week) **Mon 4:00-5:30pm & Wed 4:45-6:00pm** **Tuition: \$280 due Fall-9/1, 10/1 Spring-1/1, 2/1, 4/1**

{ } **Optional 3rd class per week** **Sat 11:45-1:00pm** **Tuition: \$330 due Fall-9/1, 10/1 Spring-1/1, 2/1, 4/1**

Tuition Calculation

Student Tuition \$ _____

Sibling Tuition (-10%) _____

Registration Fee* _____

TOTAL \$ _____

Tuition calculation for families should be filled out on one registration form. Please do so on the registration form of the student enrolled in more classes.

Agreement (initial each paragraph)

_____ Payment policies: I have read and understand OBS's payment and tuition policies. Tuition received after the 10th will be subject to a \$10 late fee. Returned checks are subject to a \$25 fee per occurrence.

_____ Withdrawal policies: I understand that OBS's academic year runs from Sept. to June. All students are presumed to be enrolled for the entire year unless the student is withdrawn in writing. OBS requires a 30 day notice of withdrawal or change of schedule.

_____ School conduct: I understand and agree that my child will follow the dress code and conduct policy. I will ensure that my child arrives and is ready for class in a timely manner. Students who continue to be late without an acceptable excuse, are disrespectful to teachers/students, and are disruptive to the class will be asked to observe rather than participate or discontinue classes.

_____ I have read, understand, and signed the release of liability form, and hold harmless Oakland Ballet School, faculty, and Directors from any and all liability, claims, and causes of action whatsoever resulting from loss, damage, injury including death, that may be sustained by the student, while on the premises and supervision of the OBS.

Use of Image: Students may be photographed and/or videotaped in connection with OBS during class, rehearsals, and/or performances. Some of these images may be included in brochures, posters, marketing materials, and website content. We respect the desire of some parents to keep the images of their children off of the Internet. **Please check one.**

_____ I agree that my child's image may be used for all media, including the school website and release OBS from all damage, liabilities, and claims arising from such use.

_____ I agree that my child's image may be used in all media **except** on the website and release OBS from all damage.

Signature of Parent/Guardian _____ Date _____

Release and Waiver of Liability and Indemnity Agreement

In consideration of being permitted to participate in any way in the Dance Program indicated below and/or being permitted to enter for any purpose any restricted area (here in defined as any area where in admittance to the general public is prohibited), the parent(s) and/or legal guardian(s) of the minor participant named below agree:

1. The parent(s) and/or legal guardian(s) will instruct the minor participant that prior to participating in the below dance activity or event, he or she should inspect the facilities and equipment to be used, and if he or she believes anything is unsafe, the participant should immediately advise the officials of such condition and refuse to participate. I understand and agreed that, if at any time, I feel anything to be UNSAFE, I will immediately take all precautions to avoid the unsafe area and REFUSE TO PARTICIPATE further.

2. I/WE fully understand and acknowledge that:

(a) There are risks and dangers associated with participation in Dance events and activities which could result in bodily injury partial and/or total disability, paralysis and death.

(b) The social and economic losses and/or damages, which could result from these risks and dangers described above, could be severe.

(c) These risks and dangers may be caused by the action, inaction or negligence of the participant or the action, inaction or negligence of others, including, but not limited to, the Releasees named below.

(d) There may be other risks not known to us or are not reasonably foreseeable at his time.

3. I/WE accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis or death, however caused and whether caused in whole or in part by the negligence of the Releasees named below.

4. I/WE HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the dance facility used by the participant , including its owners, managers, promoters, lessees of premises used to conduct the dance event or program, premises and event inspectors, underwriters, consultants and others who give recommendations, directions, or instructions to engage in risk evaluation or loss control activities regarding the dance facility or events held at such facility and each of them, their directors, officers, agents, employees, all for the purposes herein referred to as "Releasee" ...FROM ALL LIABILITY TO THE UNDERSIGNED, my/our personal representatives, assigns, executors, heirs and next to kin FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES OR DAMAGES AND ANY CLAIMS OR DEMANDS THEREFORE ON ACCOUNT OF ANY INJURY, INCLUDING BUT NOT LIMITED TO THE DEATH OF THE PARTICIPANT OR DAMAGE TO PROPERTY, ARISING OUT OF OR RELATING TO THE EVENT(S) CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEE OR OTHERWISE.

5. I/WE HEREBY acknowledge that THE ACTIVITIES OF THE EVENT(S) MAY BE DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of THE UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.

6. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the Province or State in which the event is conducted and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.

7. On behalf of the participant and individually, the undersigned partner(s) and/or legal guardian(s) for the minor participant executes this Waiver and Release. If, despite this release, the participant makes a claim against any of the Releasees, the parent(s) and/or legal guardian(s) will reimburse the Releasee for any money which they have paid to the participant, or on his behalf, and hold them harmless.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Dance School **Oakland Ballet School** Date _____

Printed Name of Participant _____

Parent or guardian signature _____