

Returning Students—Youth Graded Program

Registration Form 2009-2010

Please update the form and return with payment. Payment is **due** Friday, September 4th. Please review our tuition payment policies. **Late fees will be assessed** for payments received **after** due dates.

Student's Name: _____

Date of Birth: _____ Class Level: _____

Parents' or Guardians' Names _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Mother's Work Phone: _____ Father's Work Phone: _____

Company Name _____ Do they have a matching gift program?

Cell-phone number or other: (please indicate whose phone) _____

E-mail address(es): _____

Emergency Contact – Name: _____ Phone: _____

Changes in student's general health:

Student's special needs:

Volunteer Interests or special skills:

Registration Fee: _____

Tuition Plan (circle choice): 1 2 3 4

If making full payment by credit card or choosing a payment plan, please complete the enclosed credit card authorization form. If paying by check, please indicate check number below.

Check # _____

Leotard size: _____ (for costume planning purposes)

Authorized signature _____

ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY

Palo Alto Ballet, Inc., d.b.a. Western Ballet, its affiliated entities, agents, employees and contractors, will be referred to as WESTERN BALLET.

ASSUMPTION OF RISK

I, _____, am not a minor and I understand that by being a participant in WESTERN BALLET school activities, that:

- A. I will have the opportunity to participate in various activities, including dance classes, workshops, rehearsals and performances, held at WESTERN BALLET School. I will receive information and instruction about dance and other related activities. I understand that by participating in any of these activities, that I may be subjected to a variety of hazards and risks, foreseen or unforeseen, which may cause me to suffer property damage, injury or death (“DAMAGES”). I know that these DAMAGES can occur due to natural causes, the active or passive negligence of WESTERN BALLET, or the negligent or intentional acts of third parties and/or fellow participants. I understand that I should therefor exercise extra care for my own person. I choose to participate in WESTERN BALLET School activities, agree to pay the required costs therefor, and voluntarily assume the risks of such DAMAGES occurring while I am participating in WESTERN BALLET School activities.
- B. WESTERN BALLET may at times deliver participants to various third parties, who are not WESTERN BALLET employees, who will conduct, supervise, guide or instruct participants in various activities. WESTERN BALLET assumes no duty to certify, monitor or verify the qualifications of any third parties involved in these activities. Participants concerns regarding the qualifications of any third parties conducting these activities should be directed to the third parties. Participant agrees to release, indemnify and hold harmless WESTERN BALLET for liability for DAMAGES arising out of negligence of such third parties.
- C. I recognize that dance and all related activities require intense physical exertion that may be strenuous and may cause physical injury and therefor involve unique risks of DAMAGES, and I am fully aware of the risks and hazards involved. I understand the nature of marley floors, mobile floor bars and other dance equipment, and the consequences of wearing ballet slippers, pointe shoes, socks or bare feet and other related dance footwear, and I accept full responsibility for my own choice of footwear. I am satisfied with the condition of WESTERN BALLET School’s facilities and hereby assume all the risks inherent in the activities there. I voluntarily assume the risks of any and all DAMAGES I may incur at WESTERN BALLET School, unless such DAMAGES are directly related to the negligent operation of the facilities by WESTERN BALLET.

RELEASE AND WAIVER OF LIABILITY

In consideration of being accepted by WESTERN BALLET to participate in any activity, I hereby agree to hold WESTERN BALLET, its employees, agents, contractors or owners, harmless from any and all liability, action, causes of action, debts, claims and demands of every kind and nature whatsoever which I now have or which may arise from or in connection with my WESTERN BALLET School activity. The terms of this agreement shall also serve as release and assumption of risk from my heirs, executors and administrators for all members of my family.

I further agree that this RELEASE and ASSUMPTION OF RISK AGREEMENT and WAIVER OF LIABILITY is intended to be as broad as permitted under California law, and that if any portion thereof is held invalid, it is agreed that all other portions shall continue in full legal force and effect.

I HAVE READ AND UNDERSTOOD THE ABOVE AGREEMENT AND VOLUNTARILY AGREE TO SIGN THIS DOCUMENT.

IF THE PARTICIPANT IS A MINOR, THIS DOCUMENT IS TO BE SIGNED BY THE MINOR;S LEGAL GUARDIAN. BY SIGNING BELOW THE MINOR’S LEGAL GUARDIAN INDICATES THAT HE OR SHE UNDERSTANDS THAT “I” ABOVE REFERS TO BOTH HIM OR HER AND THE MINOR.

DATED

SIGNATURE

ADDRESS

PRINTED NAME