

Pineapple Dance

Participant(s) : _____

I understand that dance is a strenuous activity, and that injuries can occur.

I will not hold Pineapple Dance or its instructors, staff, or directors liable for injuries sustained either during or outside of class and / or performances.

I understand that a proper warm up is essential to preventing injury and to improving my skills.

Therefore, I will be punctual and ready for class.

I will behave properly, respecting myself, classmates, and the instructor, at all times.

I understand that I may be asked to leave if I am unable to behave appropriately.

I am able to participate fully in class, having no medical conditions that would affect my ability to take part in any physically strenuous activity.

I will always inform all my instructors of any physical issues that may affect my ability within class and rehearsal.

I agree to pay tuition on time, according to the agreed upon payment plan.

Signed _____ Date _____

Print _____ Relation _____

_____ I am 18 years or older

_____ I am the legal guardian of the participant under 18

Performance Permission: yes _____ no _____

How did you find us? _____

Fill out back side as well.

2017-2018 School Year Photo/Video Release Form

I hereby give permission for images and video of me/my child, captured during Pineapple Dance classes and/or events, to be used solely for the purposes of the Pineapple Dance School's promotional material and/or publication, and I waive any rights of compensation or ownership thereto.

Name of Participant: _____ Age: _____

Name of Parent Guardian: _____
(Please print)

Please Circle One:

Option 1:
Photos, Videos, Name are fine

Option 2:
Photos and Videos but NO NAME

Option 3:
Photo and Name

Option 4:
Photo but NO NAME

Option 5:
None

Signature of parent/guardian: _____