

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 e or outside of class and / or performances.	ither during
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 in any physically strenuous activity. I will always inform all my instructors of any physical issues that may affect my ability within classehearsal.	- -
I agree to pay tuition on time, according to the agreed upon payment plan.	
Signed Date	
Print Relation	
I am 18 years or olderI am the legal guardian of the participant un	ider 18
Performance Permission: yesno	
How did you find us?	
Fill out back side as well.	

2018-2019 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		
Photos and videos but NO NAME		
Option 3:		
Photo and Name		
Option 4:		
Photo but NO NAME		
Option 5:		
None		
Signature of parent/guardian:		