

HUNTER



DANCE CENTER

Liability Waiver and Photo Release

Student's Name:

Classes Enrolled In:

Birthdate:

Name of parent(s):

Address:

Phone number:

E-mail:

Any allergies or special needs? Yes No

If yes, please explain: _____

How did you hear about us?

This application must be signed for admission. I certify that the above named student is in good health and capable of participating in classes. I hereby release Hunter Dance Center (HDC), its agents and employees, from all liability for personal injury, illness or property loss or damage. I agree to allow HDC to take photographs of my child or my child's class for archival purposes and studio promotional use (names will be withheld).

Signature:

Date:
