

DANCE FACTORY  
505 SHARROTT'S ROAD  
STATEN ISLAND, NY 10309  
718-689-0019

## DANCE FACTORY REGISTRATION FORM

STUDENT'S FULL NAME (PLEASE PRINT): \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE #: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

PARENT'S FULL NAME: \_\_\_\_\_

PARENT'S CELL PHONE #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

STUDENT'S MEDICAL CONDITION (IF ANY, PLEASE DESCRIBE) \_\_\_\_\_

\_\_\_\_\_

HOW DID YOU HEAR ABOUT US?: \_\_\_\_\_

HOW WOULD YOU LIKE TO BE CONTACTED? \_\_\_\_\_

### ACKNOWLEDGEMENT OF CLASSES & TUITION RATE

PLEASE LIST CLASSES FOR WHICH YOU ARE REGISTERING (DAY & TIME): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TOTAL MONTHLY TUITION: \$ \_\_\_\_\_

\_\_\_\_\_

### TUITION REFUND POLICY

**ALL TUITION AND FEES PAID TO THE SCHOOL ARE NON-REFUNDABLE AFTER THEY HAVE BEEN PAID, REGARDLESS OF WHETHER OR NOT THE PROGRAM IN QUESTION HAS BEGUN.**

\_\_\_\_\_

*Signature of Parent / Guardian*

\_\_\_\_/\_\_\_\_/\_\_\_\_

*Date*

## REGISTRATION AGREEMENT

AS THE STUDENT, PARENT, OR LEGAL GUARDIAN, I HEREBY STATE THAT I HAVE READ ALL GUIDELINES OUTLINED IN THE DANCE FACTORY INFORMATION BOOKLET AND ARE IN FULL AGREEMENT WITH REGARDS TO ALL POLICIES. I UNDERSTAND THAT DANCE FACTORY INC. RESERVES THE RIGHT TO MAKE ALL FINAL DECISIONS WITH REGARDS TO: STUDENT PLACEMENT, CHOREOGRAPHY, COSTUME, MUSIC, CLASS SCHEDULES, AND ANY/ALL OTHER ASPECTS ASSOCIATED WITH THIS SCHOOL. I UNDERSTAND THAT NOT ABIDING BY THE DANCE FACTORY GUIDELINES CAN RESULT IN TERMINATION OF ENROLLMENT WITHOUT REFUND OF: TUTION, COSTUME DEPOSITS OR BALANCES, REGISTRATION FEES, AND ANY OTHER PAYMENTS MADE TO DANCE FACTORY. I HAVE READ AND FULLY AGREE TO THE ABOVE STATEMENTS.

\_\_\_\_\_  
**Signature of Parent / Guardian**

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
**Date**

## WAIVER AND RELEASE AGREEMENT

1. I am not aware of any medical condition I have/my child has that should preclude me/my child from participating in dance and/or aerial activities. I understand there is a definitive risk of injury associated with dancing and/or performing aerials, and that such injuries include, but are not limited to bruises, dislocations, broken bones, torn or damaged muscles and ligaments, paralysis, and even death. I understand that such injuries may be caused in whole or in part by myself, or by the actions or inactions of other students or instructors.
2. In consideration of being accepted for dance and/or aerial instruction by Dance Factory Inc. (d.b.a. Dance Factory), and the Owners/Artistic Directors, Nicole D'Agostino, Michelle Caputo, and Lauren Volpe, and in further consideration of the expertise and achievements of instructors at Dance Factory Inc. (d.b.a. Dance Factory), and the limited number of students that may be accepted by Dance Factory Inc. (d.b.a. Dance Factory), I agree to all of the following, which shall bind me, and also my heirs, assigns executors, and administrators:
  - a. I/My child agree(s) to immediately stop performing any activity if I/they feel any pain, dizziness, light-headedness, or any other symptoms, and to immediately report those symptoms to the instructor. I/they also agree to carefully follow the instructors' directions, to ask for additional directions if I/they do not understand any particular activity, and to immediately stop any activity which I/they believe I am/they are not competent or confident enough to perform.
  - b. To the fullest extent permitted by law, I agree and represent that I assume the risk and responsibility for any and all injuries to myself/my child that I/they sustain while performing any dance or aerial activities, including any and all costs and damages that are a consequence of such injuries, and whether such injuries, costs and damages were caused in whole or in part by the Dance Factory Inc.'s (d.b.a. Dance Factory) students, or instructors, or the Owners/Artistic Directors, Nicole D'Agostino, Michelle Caputo, and Lauren Volpe.
  - c. To the fullest extent permitted by law, I agree to defend, indemnify and hold harmless Dance Factory Inc. (d.b.a. Dance Factory), and the Owners/Artistic Directors, Nicole D'Agostino, Michelle Caputo, and Lauren Volpe, and their instructors, agents, employees, contractors, clients, and students, from and against all claims, costs, damages, losses and expenses, including but not limited to attorney's fees, arising out of or resulting from my/my child's performance or other participation in any dance or aerial activities, regardless of whether or not such claim, cost, damage, loss or expense, was caused in part by a party indemnified hereunder.

I have fully read and agree to all of the above, and I make this agreement and the representations herein in order to induce Dance Factory Inc. (d.b.a. Dance Factory) and the Owners/Artistic Directors, Nicole D'Agostino, Michelle Caputo, and Lauren Volpe to accept me/my child as a student for dance and/or aerial instruction.

\_\_\_\_\_  
**Name of Student(s)**

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Parent / Guardian**

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
**Date**