



Registration Form

(Please make enough copies for all your participants to sign.)

Dates of Workshop/Camp: _____

Name of School or Program: _____

Contact Person: _____

Phone: _____ **E-mail:** _____

Number of Participants: _____

(A minimum of 14 students required if minimum is not met, a flat fee will apply)

Participant information:

Name: _____ **Age:** _____

Acknowledgement:

Payment: Payment must be made by the final day of the workshop or choreography session. Unless other arrangements have been made.

Cancellation of workshop/Camp: *Innovate Dance LLC* reserves the right to cancel classes under certain circumstances. If the instructor falls sick and no replacement can be found, the class will be cancelled and a full refund will be given. If attendance of the class falls below the minimum required, a flat rate will apply

Instructor Changes: While every effort is made to provide consistent instructors, please be aware that instructors may change without notice.

Liability Waiver: I hereby release, and discharge *Innovate Dance LLC* and its contractors from all liability to the participant. I hereby agree to indemnify and hold harmless from any claim or demand on account of injury or damage which the participant may suffer as a result of participation in the *Innovate Dance LLC* Workshop or Camp. I understand that the dance activities can, in some cases, cause injuries. I am familiar with the potential risks involved in the dance camp activities, and I assume all such risk on behalf of the participant.

I acknowledge that I have read and understand the procedures and policies of Innovate pertaining to Workshop/Camp procedures and guidelines.

Signature of Parent: _____ **Date:** _____

Signature of Coach or Advisor: _____ **Date:** _____