

**2020 Summer Stay Fit Through The Arts, Inc Registration/ Agreement Form:**

**Participant's Name:** 1. \_\_\_\_\_ 2. \_\_\_\_\_

**1. D.O.B.** \_\_\_/\_\_\_/\_\_\_ **2.D.O.B.** \_\_\_/\_\_\_/\_\_\_ (D.O.B optional for adults)

**Participant's Name:** 3.. \_\_\_\_\_ 4. \_\_\_\_\_

**3. D.O.B.** \_\_\_/\_\_\_/\_\_\_ **4.. D.O.B.** \_\_\_/\_\_\_/\_\_\_ (D.O.B optional for adults)

**Parent's or legal guardian's Names ( KIDS THAT IS UNDER AGE 18 ONLY):**

Street Address: \_\_\_\_\_

City \_\_\_\_\_ ZIP \_\_\_\_\_ Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**PROGRAM:** Hip Hop Dance and/or Tumbling

Does the student have allergies or take medications? Yes or No

If yes, please explain:

Tuition Amount Enclosed: \$ \_\_\_\_\_ (NON-REFUNDABLE):

Optional: Credit card: Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Zip Code: \_\_\_\_\_ . CVV: \_\_\_\_\_

Referred by: \_\_\_\_\_

**Parent's and Participants Stay Fit Through The Arts 15 weeks Registration Terms:**

**Parents and Students, for consideration of agreeing, stipulation, hereinafter mentioned, contained, to be kept by the parents. The Parents and Participants agree to take upon the terms and conditions which hereinafter appear called Agreement Term. This Stay Fit Through The Arts agreement term will take place hereinafter appear at 948 Dixie Dr Jonesboro, Ga 30236 June 13-July 25 and said term shall be referred to hereinafter as The Stay Fit Through The Arts per 6 weeks Registration Agreement Period. Participants must notify Brian Jones on their schedule for these 6 weeks period.**

**This Stay Fit Through The Arts per 6 weeks Registration Agreement Period, by and between Brian Jones, First party, hereinafter called Executive Director, and Parents of the child or parties that agrees on upon signature of this agreement.**

**Stipulations:**

**Participants must commit to the appropriate picked program schedule. Brian Jones must confirm your time of class. No period of grace, or right of set-off unless agreed by Executive Director. Additional payments must be made to Brian Jones only. Participants must report to the program classes in appropriate dress attire. All black dance attire is accepted. Facemask are preferred. No Jeans and no cleavage showing. No unaccepted behavior at any time during the program/classes. No gum, cell phones, candy, or food on the floor. NO REFUNDS for any reason. There will be ending demonstration and/or ending recital/performance. All parents must provide a written statement if you want to withdrawal during your 6 week period. Parents must abide by the rules and regulation memo. If you enroll in the middle of the agreement this agreement will still end on July 25. Limited of 9 students per class and only 1 adult will be allowed in the studio with social distancing during class.**

**“Our goal is to enhance young adults for the future that will change the atmosphere through dance and theater as they will have character, leadership skills, dependable and reliable personalities, individual power, dedication, and a mature soul for the entertainment industry or auxiliary for any other career of choice.” WE STRIVE FOR SUCCESS@Stay Fit Through The Arts, Inc!!!!**

I, \_\_\_\_\_ have enrolled \_\_\_\_\_ in a program of strenuous physical activity, offered by Stay Fit Through The Arts, Inc. I, for myself, my heirs and assigns, hereby release Stay Fit Through The Arts, Inc, their families, employees, affiliated companies, or Stay Fit Through The Arts, Inc from any claims, demands and causes of action from my or the above named person’s participation in any of the above stated programs. I hereby release Stay Fit Through The Arts, Inc for any liability now or in the future for any injuries or illness through participation in the above state programs offered at Stay Fit Through The Arts, Inc at any time, while in the vicinity, or activity sponsored, represented or organized by Stay Fit Through The Arts, Inc. I also understand that photos and videos may be taken throughout the year and there images may be published or used for advertising and promotional purposes by Stay Fit Through The Arts, Inc, and its agents. I understand I will not be able to protest any such use or receive compensation of any type for use of these pictures.

By signing, I hereby affirm that I have read and understand and agree to the above points, agree to the rules and regulation memo, and additionally agree that they will be executed beginning the day and year first above written agreement.

\_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
PARTICIPANTS/ PARENTS/ OR LEGAL GUARDIAN