



Miss Dee's School of Dance
 115 S. Lafayette
 Greenville, MI 48838
 616/754/1722

2020

HOLD HARMLESS /PAYMENT AGREEMENT Photography Release

I, the undersigned, as parent or legal guardian of _____, do hereby agree to hold Dionne Luxford, Miss Dee's School of Dance, any employees or agents, and chaperones, harmless for any accident, injury, or misfortune that may occur while he/she is enrolled at Miss Dee's School of Dance.

I understand that though every precaution is being taken to keep my child safe from Coronavirus/Covid-19 while at the dance studio I understand that it is an open public business with many patrons. If my child should contract the virus I agree not to hold Dionne Luxford, Miss Dee's School of Dance or any agents or contractors liable. I understand that my child must wear a mask while attending classes until such a time that Miss Dee deems it is safe to go without one. Also, I hereby agree to notify Miss Dee's School of Dance as soon as possible if anyone in my family/household contracts Covid-19, test positive for Covid-19 or has any contact with anyone who does test positive for Covid-19.

I understand that I am responsible for making all lesson, costume and recital fee payments when they are due according to the payment booklet that I have received. I also understand that if the payment is not paid in full thirty (30) days after the date listed on the invoice that I will be charged a \$10.00 late fee for each invoice that is late. If my account is past due by more than 45 days, my child will not be able to participate in classes until the account is current. I also understand that should I default on my account I will be responsible for any and all costs that are incurred for the collection of my account, court or otherwise.

I understand that the photographs taken at studio functions by Dionne Luxford, or other studio photographers are the property of Miss Dee's School of Dance and maybe used in promotional advertisements of Miss Dee's School of Dance or on the website. I give my permission for my, named above, child's photograph to be taken.

 Parent or Legal Guardian's Signature

 Date

Miss Dee's School of Dance

Student Info. Update Form

NAME: _____

PHONE: _____

ADDRESS _____

CITY: _____

DATE OF BIRTH _____

PARENT NAMES _____

EMAIL ADDRESS _____

CELL PHONE # Mom _____

Dad's _____