

Elkhorn Dance Academy



RELEASE OF LIABILITY/ENROLLMENT CONTRACT

Parent and Dancer information

Parent Name	Date
Dancer Name	Dancer age
Dancer Birthdate	
Email address	
Phone Number	Emergency Contact

Summary of Release

I understand that I _____ am enrolling my child in dance classes at our own risk. While all precautions will be taken to ensure a safe, educational, and productive environment, I agree to hold no liability against Elkhorn Dance Academy, its owners, or investors for injuries or damage to self or private property. I, the above-named parent/guardian, am assuming all risk for my child/student. I have read and agree to all terms listed in the contract. I understand that all payments must be made by the 1st of the month. Payments past the 3rd will accrue late fees/result in removal from class.

Enrollment

Please list all classes, days, and times you would like to enroll for.

EX: Creative Movement Mon 4:30pm

Parent Signature (if student is minor)

Date

Owner Signature