

Sharpsburg Dance Academy Summer Camp Registration Form

- * There is a non-refundable \$25 registration fee due at the time of sign-up to hold your spot in your camp of choice. Full camp fees become non-refundable two weeks prior to camp start date.
- * All camps must have at least 4 students enrolled. In the event that this number is not met, you will be notified and we will attempt to place your child in an alternate camp.

Student's Name _____ DOB _____

Camp Name and Dates: _____

Address _____ City _____ Zip _____

Primary Phone: _____ Cell Number _____

Parents Name _____ . Phone (2): _____

Email _____

Emergency Name and Number _____ # _____

Release of Liability

As the legal parent or guardian, I release and hold harmless Sharpsburg Dance Academy LLC, its owners and operators from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant and/or the undersigned, while in or upon the premises or in route to or from any of said premises. I understand that appropriate physical contact is required during the instruction of dance & tumbling and I give permission for instructors to make appropriate physical contact with me or my child for such instruction. _____ I've read the above and agree

Under Georgia law, there is no liability for an injury or death of an individual entering these premises if such injury or death results from the inherent risks of contracting COVID-19. You are assuming the risk for you and your dancer by entering these premises. O.C.G.A 51-16-3

Internet/Photo Release

The website includes information and photos involving Sharpsburg Dance Academy LLC (SDA) activities, performances and competitions throughout the year. Every effort will be made to protect the individual identity of all students involved with SDA. No telephone numbers or addresses will be placed on website. There may also be times that student pictures are pictured in local newspapers. For these reasons we are asking for permission to use yours/your student's photographs in publication regarding SDA.

_____ **I Do:** hereby grant permission to SDA to use my and /or my child's photograph on its World Wide Website or in other publications associated with SDA without further consideration, and I acknowledge the organization's rights to treat the photograph at its discretion.

_____ **I Do Not:** grant permission to SDA to use my and/or my child's photograph in any publications associated with the program.

I understand and agree to the policies listed and assume all financial responsibilities.

Signature _____ Date _____
(Parent, Legal Guardian, of Adult Student)

Office Use Only:

Registration Amount \$ _____ Paid _____

Camp Tuition Amount \$ _____ Paid _____