

International Ballet Classique Masterclass Series Registration Form

September 16th & 17th 2017
Neumann University, 1 Neumann Dr. Aston, PA 19014

Student Information

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Mobile Phone: _____ Date of Birth: _____

Parent/Guardian Information

Name: _____ Relationship: _____

Home Phone: _____ Mobile Phone: _____ Email: _____

Contact in Case of Emergency

Name: _____ Relationship to Student: _____

Home Phone: _____ Mobile phone: _____

Medical History

Known Allergies: _____ Medications: _____

Parent Permission for: Tylenol Ibuprofen Benadryl/Antihistamine

I have read and signed: Hold Harmless Release Form Photo/Video/Press Release Form

Student Signature: _____ ***Parent Signature:** _____

Date: _____ ***Date:** _____

*If dancer is under 18 years of age, this agreement **MUST** be signed by parent or legal guardian.

International Ballet Classique Permission for Release of Photos, Press, and Videotaping

For purposes of Marketing and Distribution, I agree that any photography or videotaping, or press release by International Ballet Classique may be used, disseminated, or broadcasted for IBC professional needs.

Name of Dancer: _____

Signature of Dancer: _____

***Printed name of Parent/Guardian:** _____

***Signature of Parent or Guardian:** _____

Date: _____

*If dancer is under 18 years of age, this agreement **MUST** be signed by parent or legal guardian

International Ballet Classique

Hold Harmless Agreement

I acknowledge that dance is a physical activity and recognize the possibility of injury associated with any physical activity. I hereby confirm the Dancer is current with physical examinations by personal physician(s) and is physically qualified to participate in a dance program. There is no known physical condition, which would interfere with dancer participation in this program. Dancer carries health insurance that is provided by family, self, employer, or state or federal health insurance carrier.

I agree to release, discharge, indemnify and hold harmless International Ballet Classique, its affiliated organizations, employees, teachers, staff, volunteers, and associated members from any and all claims by and on behalf of the dancer that might arise by dancer participation in this dance program.

Conduct, at all times, must be impeccable. Inappropriate conduct, language, or disrespect for instructors, other dancers, employees, volunteers, associated members, or management is unacceptable and terms for immediate dismissal from the program. I also understand that Neumann University, where the workshop is scheduled for September 16, 2017 and September 17, 2017 is a smoke free campus. The use of tobacco is not permitted on Campus, including outside areas or in cars parked on the facility. Violation of this policy for inappropriate conduct or tobacco use will cause immediate dismissal from the program. If dismissed for conduct as stated above, there will be no refund for missed classes.

I have read and understood the above policies and agree to comply in full. If parent or legal guardian, I have explained this agreement to dancer, and dancer is also in compliance with the terms of this agreement. *If dancer is under 18 years of age, this agreement MUST be signed by parent or legal guardian.

Printed Name of Dancer

Signature of Dancer Date

***Printed Name of Parent or Legal Guardian**

***Signature of Parent or Legal Guardian Date**