

Holt Ballet Conservatory



Registration Summer Session 2012

Name _____

Home phone _____ Cell _____

Date of Birth: _____ (age) _____

Year In school: _____

Street Address _____ City _____ Zip _____

Email _____

Emergency Contact/Relationship _____ Phone# _____

Class Enrollment:	Please check appropriate blanks	
4 classes for summer session	\$45.00	\$ _____
8 classes for summer session	\$80.00	\$ _____
12 classes for summer session	\$120.00	\$ _____
16 classes for summer session	\$145.00	\$ _____
20 classes for summer session	\$180.00	\$ _____
24 classes for summer session	\$200.00	\$ _____
Registration (annual) \$30.00 /individual or \$45/famiy		\$ _____
Total		\$ _____

Please check the classes you are enrolling in:

- | | | |
|------------|-------|---|
| Mondays | _____ | Ballet I A |
| Mondays | _____ | Classical & Barefoot Ballet Variations\ |
| Tuesdays | _____ | Ballet II |
| Tuesdays | _____ | Ballet III/Pointe I & II |
| Wednesdays | _____ | Ballet I B |
| Wednesdays | _____ | Ballet III |
| Thursdays | _____ | Ballet II/prepointe/pointe I |
| Thursdays | _____ | Ballet III/pointe II |

**Holt Ballet Conservatory and The Movement Alliance
Student and Adult Classes
Student Information, Liability Waiver, and Policies Acknowledgment
Please sign below:**

I have voluntarily chosen to participate in the dance training offered Holt Ballet Conservatory and/or The Movement Alliance and acknowledge that I am under no obligation to continue such dance training. I am aware that dance training and related activities carry certain risks that can result in injury, both minor and major. By my participation in dance classes and activities at NUHS Dance Room and The Nevada City Odd Fellows Hall, I agree to take full responsibility for not exceeding my limits, for selecting the appropriate level class and for any injury I might suffer. Furthermore, I am aware that HBC and TMA instructors have the right to ask me to attend another level class if the believe I could cause harm to myself or others participating in activities above my capabilities. I understand that instructors may provide physical adjustments during class and that this is an integral part of proper dance training.

In consideration of the opportunity afforded me to participate in the dance training offered at Nevada Union High School and/or The Nevada City Odd Fellows Hall, I, on behalf of myself and heirs, guardians, personal representatives, or assigns, do hereby release, waive, discharge, and covenant not to sue HBC or TMA, its instructors, or The Nevada City Odd Fellows Hall from any and all costs, losses, damages, liabilities or claims (including without limitation arising from the negligence of any of the instructors, directors, staff, agents, officers, or representatives of HBC or TMA resulting in personal injury, accidents, illnesses {including death} or property loss) which may accrue to me in connection with any activity whatsoever at the above stated locations.

I further expressly agree that the foregoing liability waiver is intended to be as broad and inclusive as its permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the remainder of the agreement shall, notwithstanding, continue in full legal force and effect.

I have read the foregoing liability waiver, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. This agreement is freely and voluntarily executed.

By signing below, I further understand and acknowledge: that HBC and TMA have the right to refuse services and classes to any individual at anytime.

**Signature: _____
(If over 18; otherwise parent or legal guardian must sign and is bound to minor and terms.)**

Date: _____

I, the undersigned, realize that photographs of myself or my child dancing, may be used by Holt Ballet Conservatory for marketing and promotions.

Signature: _____

Date: _____

