



**Registration Form
For Workshops**

Student Information

Name: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____

Email Address: _____

Mailing Address: _____

Emergency Contact Information

Name/Relationship: _____

Primary Phone: _____ Alternate Phone: _____

Medical Conditions / Special Needs

Do you have any medical conditions, are you on special medication, or do you have any special needs we should be aware of? _____ If you answered yes, please complete our Physical Activity Readiness Questionnaire (PAR-Q).

How did you hear about us? _____

Classes Requested

Class Dates	Class Description	Day	Time	Cost

IMPORTANT POLICY & REGISTRATION INFORMATION

Registration. The undersigned acknowledges that upon CoreRageous Dance & Movement's acceptance of this registration application, named student is enrolled in the class(es) indicated and that the undersigned is responsible for the full amount of tuition for the period(s) enrolled.

Cancellation of a Class for the Entire Session. Regrettably, CoreRageous Dance & Movement may have to cancel a scheduled class, workshop or camp from time to time for insufficient enrollment. If you have registered for a class that is cancelled for this reason, CoreRageous Dance & Movement will offer you an alternative class of the same or similar type or, if you prefer, will refund all tuition and fees you have paid for the cancelled class. We regret that students may be inconvenienced and disappointed due to the necessity to cancel classes that do not attract enough students. We will strive to avoid such occurrences.

Cancellation of a Single Class Meeting. We will do everything in our power to arrange to have a substitute instructor available to fill in for the primary instructor for each class, so that class meetings are not subject to cancellation. However, if a pre-paid class meeting has to be cancelled by an instructor for any reason, the prorated portion of tuition paid will be refunded to the student or student's parent. In most cases, there will be advanced notice for such cancellations.

Late Registration. Late registration is permitted past the registration deadline, but there will be a \$5 late fee applied to the tuition that is calculated when you register.

Returned Checks. Returned checks will be assessed a \$30.00 returned check fee.

Class Withdrawal & Refund Policy. Refunds may be given only prior to the first class meeting or the start of the workshop. There will be a written notice requirement before the withdrawal can be permitted. If the withdrawal is due to a severe illness or injury we require a doctor's note. No refunds or credits will be given after the first class meeting for missed classes for any reason except for emergencies, severe illness, or injury. CoreRageous Dance & Movement retain the right to keep a student's enrollment status active until a notice is received. As a reminder, all holidays and studio closings are built into the studio's class schedule already.

REGISTRATION & PAYMENT OPTIONS

(For those activities that have specific registration and payment instructions, please follow those instructions. For all other activities, please follow these procedures.)

OPTION 1 – BY MAIL: From this list, you can choose the class(es) that you are interested in. Simply send us a note identifying the camp or workshop and the participants' names, along with a check made out to "CoreRageous Dance & Movement" or "CD&M" and mailed to:

CoreRageous Dance & Movement
8600 Foundry Street, Box 2018
Savage, MD 20763

When we receive your check, your position in the activity will be reserved. You can complete registration paperwork at the studio on the day of the class, but please arrive at least 15 minutes early to give yourself time to do this. You may also come in during business hours any time before the date of your class to complete the registration. See Option 2 below for business hours.

OPTION 2 – IN PERSON: If you would prefer, you may come to the studio during business hours to register and provide payment. [At the studio, we accept cash, check, Visa, Master Card, and Discover.](#)

BUSINESS HOURS

Monday through Thursday, 4:00 pm – 8:00 pm
Friday, 11:30 am – 3:30 pm
Saturday, 10:00 am – 2:00 pm

OPTION 3 – BY PHONE: If you would like to reserve your place in a class by phone, call us during business hours (see Option 2 above for business hours) at 310-490-8898. When you call, please be prepared to give your credit card information over the phone. [We accept Visa, Master Card, and Discover.](#) We will reserve your space when we receive and process your credit or debit card information. You can complete registration paperwork at the studio on the day of the class, but please arrive at least 15 minutes early to give yourself time to do this. You may also come in during business hours any time before the date of your class to complete the registration.

Registration and payment must be submitted prior to the camp or workshop to assure your spot.

Photo & Video Release. The undersigned grants permission to CoreRageous Dance & Movement, during student's enrollment in a dance or fitness class or participation in other CoreRageous Dance & Movement programs, activities, or events, to photograph and/or video the student. CoreRageous Dance & Movement shall be permitted to use the student's name, voice, likeness, and picture in connection with any advertising, publicity, promotional, and/or other marketing activities relating to such student's participation as a student at CoreRageous Dance & Movement, in perpetuity, in all media, whether now existing or hereafter created, including, but not limited to, printed materials, brochures, radio, films, motion pictures, videos, television, and computer on-line media, including web sites. CoreRageous Dance & Movement may exercise the foregoing rights without payment of any fee or other remuneration and without any prior notice to the undersigned. The undersigned acknowledges and agrees that any recordings, photographs, and the like provided for herein shall be owned by and the sole property of CoreRageous Dance & Movement.

Waiver & Release of All Claims. I (*print your name*) _____, acknowledge that I understand that participation in dance and other activities provided by CoreRageous Dance & Movement, LLC, may result in unavoidable injuries, including, but not limited to, muscle or soft strains, sprains and tears, broken bones, shin splints, heart attack, heat

prostration, knee/lower back/foot injuries, any other illness, soreness, and severe injuries such as paralysis or even death from various causes, known or unknown, which include, but are not limited to, the weight of the body during certain movements, rotation of the body, and movement of the body, in a unique environment. I am fully aware of the inherent risks in participating in dance and other activities offered at CoreRageous Dance & Movement.

In consideration for agreeing to permit me to participate in dance or fitness training or other activities offered by CoreRageous Dance & Movement, I, my heirs and assigns, next of kin, and all others acting on my behalf agree to waive any and all rights, claims, damages, actions, causes of action, or suits of any kind or nature whatsoever, which I have against CoreRageous Dance & Movement, LLC, or its agents, officers, employees, representatives, executors, and/or other acting on their behalf for any injuries suffered or damages as a result of engaging in those activities or training programs offered by CoreRageous Dance & Movement. It is also my intent to release CoreRageous Dance & Movement, Adrienne Rieken, and any agents, officers, employees, representatives, executors, or other acting on their behalf from liability for any injury or damage to me that may occur, including those caused by the negligent act or omission of any of those mentioned or others acting on their behalf, or in any way arising out of or connected with my participation in any activities of CoreRageous Dance & Movement or in the future.

Further, in case of accident, injury, or sudden illness, I authorize any first aid or emergency medical care that may become necessary for me while I am at the CoreRageous Dance & Movement facility or otherwise in the care of CoreRageous Dance & Movement staff elsewhere. I authorize that I be transported to a local medical facility. If I am unable to speak for myself, I hereby grant permission for the administration of all medical treatment necessary. I agree to provide health insurance or to guarantee payment of any medical expenses incurred as a result of training, performing, or participation in activities with CoreRageous Dance & Movement. By executing this document, I hereby assume all risk of injury or loss to which I may be exposed.

(Please initial _____) My signature at the end of this document, which is provided voluntarily, attests that I have read and understand completely the risk and WAIVER OF LIABILITY described above, and that I agree with the terms presented herein.

I have read all the above Policies & Agreements in their entirety, understand them, and agree to comply with their contents.

Student's SIGNATURE: _____ Date: _____

Student's PRINTED Name: _____