



## Consent Form 2019 - 2020

Student's Name: \_\_\_\_\_

### POLICY AGREEMENT

I have read, understood and agree to all policies put forth by Tuzer Dance School.

Specifically, but not limited to the following:

(Please initial)

\_\_\_\_\_ I understand that if I have a credit card on file, tuition will be auto drafted on the 2nd of each month.

\_\_\_\_\_ I understand that failure to pay tuition by the 7<sup>th</sup> of each month (or update credit card) will result in a \$10 late fee.

An additional \$5.00 fee will be added if not paid by 15th. This \$15.00 fee will be assessed monthly until balance is paid.

\_\_\_\_\_ I understand that monthly tuition is never prorated but determined from an average of entire classes from Sept – May.

\_\_\_\_\_ I understand that ALL payments made are non-refundable.

\_\_\_\_\_ I understand that written notice must be given IN PERSON to the front office 30 days prior to the month of withdrawal to avoid tuition charge for the month.

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### LIABILITY DISCLAIMER

As the enrolled participant and/or the parent/guardian of the enrolled participant, I agree and understand that dance/fitness training is a potentially hazardous activity. I recognize that there are risks inherent in dance training including but not limited to serious physical injury. The participant hereby agrees to participate in activities of Tuzer Dance School and hereby agrees to indemnify and hold harmless Tuzer Dance School, its instructors, officers, directors, agents and employees against any liability resulting from any injury that may occur to the participant while participating in activities of the Tuzer Dance School. The participant also agrees to indemnify Tuzer Dance School for any damages incurred arising from any claims, demand, action or course of action by the participant. The enrolled participant authorizes any representative of Tuzer Dance School to have the participant treated in any medical emergency during their participation in activities of the Tuzer Dance School. Further, the participant and/or parent/guardian agrees to pay all costs associated with medical care and transportation for the participant.

Parent / Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PERMISSION OF WEB SITE POSTING AND MARKETING MATERIALS

I hereby acknowledge the following websites maintained by Tuzer Dance School & Tuzer Ballet:

www.tuzerdance.com and www.tuzerballet.com. (Please check below)

I grant permission to Tuzer Dance School/Tuzer Ballet to use my child's name (first name only) and/or picture to be presented on the website and in any marketing materials at any time.

I deny permission to Tuzer Dance School/Tuzer Ballet to use my child's name and/or picture to be presented on the website or in any marketing materials at any time.

Parent / Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_