



The following student is enrolling at Busby Dancenter:

Student: \_\_\_\_\_

**PLEASE READ THE FOLLOWING CAREFULLY  
BEFORE YOU SIGN THIS FORM**

**RELEASE FROM LIABILITY:** I do hereby **release Busby Dancenter and its staff** from any **liability** occurring on or around studio premises, or at any **function** held at other locations in connection with the dance classes in which the student name above is enrolled. I **declare** that the student named above is in **good health** and can participate in dance education classes. Given the nature of dance classes, and with the knowledge that injuries **sometimes** might occur, I have taken the **necessary** steps to obtain **accident, health, or hospitalization insurance** which would cover any sustained injury. In the event of an **injury** or **emergency** when I **cannot** be contacted, I give my permission for you to obtain **medical services** for the student named above.

**WEBSITE PICTURE AGREEMENT:** I **grant** permission for Busby Dancenter to **publish** classroom and/or performance **photos** of my child(ren) on the studio **website**. I give Busby Dancenter the **perpetual, royalty-free right** to use the photo(s) in any manner **including** but not limited to the website. I understand that my child's photo will be available to the **general public**. I further understand that Busby Dancenter assumes **no** liability or responsibility **whatsoever** concerning any **consequences** of such use. I understand that if I give **notice** to the publications director that I **object** to any particular picture on the website, it will be **removed** as soon as **possible**.

**AUTHORIZATION FOR ENROLLMENT:** I authorize Busby Dancenter to enroll the student named on this form in dance class, and I **accept** responsibility for the **payment of tuition** for those classes for which the student is **registered**. I understand that classes with an **enrollment** of less than **six pupils** are subject to **cancellation**. I understand that **registration fees** are **non-refundable** and that there are **no refunds** or **deductions** for classes **not attended**. I also **accept responsibility** for payment of the **Recital Fee** unless I give **written notice** by **October 29<sup>th</sup>** that the student will **not be participating**. I understand that if I **do not give written notice** of the student's **withdrawal** from classes by the **10<sup>th</sup>** of the month I am **obligated** to pay the next month's tuition payment.

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

**THIS FORM MUST BE COMPLETED BEFORE A STUDENT CAN  
PARTICIPATE IN ANY CLASSES AT BUSBY DANCENTER. THANK YOU!!**