



Registration Form

Today's date: _____
Parent/Legal Guardian name: _____
Child/Participant name: _____
Home Phone: _____ Cell Phone: _____
Address: _____
Email Address: _____
Participant Date of Birth: _____ Male or Female (circle one)
Class/es Registered For: _____
Emergency Contact Name: _____ Relationship: _____
Phone: _____ Doctor's Name & Phone: _____
Please list any special needs or allergies we should be aware of: _____

How did you hear about us? _____

* I hereby grant CMS Dance Company permission to use photography/videography of me and/or the minor I represent as a parent/legal guardian. The images videos may be used, re-used, published, re-published the same, in whole or in part, separately or in conjunction with other photographs or videos in any medium now or hereafter known, and for any purpose whatsoever, including (but not by way of limitation) illustration, promotion, advertising, and trade without further consideration. I acknowledge CMS Dance Company's right to crop, manipulate, edit or treat the photographs and videos at its discretion on its website, printed publications, marketing materials, social media sites, and advertising. **Therefore, I agree to indemnify and hold harmless from any claims the following:**

**CMS Dance Company
Christal Shurley/Owner/Artistic Director
All employees and contractors of CMS Dance Company**

***I have read the foregoing and fully understand the contents hereof. I represent myself or that I am the parent or legal guardian of the above named participant. I hereby consent to the foregoing on my/his/her behalf.**

*** I acknowledge that I have read the CMS Dance Company handbook. CMSDC handbook can be found on our website at www.CMSDance.com**

*** I agree to adhere to the policies and procedures listed in the handbook. I also acknowledge that CMSDC reserves the right to make changes to said policies and procedures at any time.**

Signature: _____ **Date:** _____



Release and Waiver of Liability
Assumption of Full Responsibility For Risks of Bodily
Injury, Death or Property Damage, and Indemnity
Agreement

AS THE SPONSORED ACTIVITIES HAVE THE POTENTIAL TO BE DANGEROUS, WE REQUIRE ALL PARTICIPANTS TO ASSUME ALL RISKS BY SIGNING THIS DOCUMENT.

For the purposes of this agreement, “the sponsored activities” includes any activities performed with CMS Dance Company whether on the premises or not, including classes, performances, competitions, parties, seminars, camps, and the like.

The “Responsible Party” (the undersigned participant or legal guardian) agrees, fully understands and voluntarily accepts that:

- A. There are risks associated with participation in the sponsored activities, which could result in bodily injury, partial or total disability, and/or death.
- B. The participant has no mental or physical condition which would interfere with his/her ability to participate in or attend any such event or activity.
- C. These risks may be caused by the action, inaction, negligence, carelessness, on the part of CMS Dance Company or any of its partners, officers, agents, employees, contractors, and there may be other risks not known to us or not reasonably foreseeable at this time.

Release and Indemnification in Personal Injury or Property Damage Claims. In consideration of CMS Dance Company permitting the below named participant to enroll in and participate in any of these activities beginning on the date of enrollment and thereafter as the Participant shall be enrolled in sponsored activities, the Participant and/or the Responsible Party agrees for him/herself, the minor Participant, and their respective family, heirs, executors, administrators and assigns, and voluntarily releases, discharges and promises not to sue, and otherwise indemnify CMS Dance Company, Christal Shurley (Artistic Director), or any of its partners, officers, agents, employees for any and all claims for personal injury, property damage, or wrongful death occurring to the Participant arising out of engaging (or receiving instruction) in the sponsored activity wherever and however it may occur and for whatever period the activities or instructions may continue and **including claims, or demands based on the negligence of CMS Dance Company, Christal Shurley, its partners, agents, employees or contractors.**

The undersigned Participant and/or Responsible Party, agrees for himself/herself, the minor Participant, and their respective family, heirs, executors, administrators, and assigns, that in the event any claims for personal injury, property damage or wrongful death shall be prosecuted against CMS Dance Company, Christal Shurley or any of its partners, officers, agents, employees, he/she shall indemnify, save and hold harmless CMS Dance Company, Christal Shurley, and all of its partners, agents, or employees for any and all claims by whomever or wherever made for personal injuries, property damages, wrongful death **including claims or demands based on the negligence of CMS Dance Company, Christal Shurley, its partners, agents, employees or contractors.**

If, despite this release, the Participant and/or the Responsible Party makes a claim against CMS Dance Company or Christal Shurley or its employees, or contractors, the Participant and/or Responsible Party agrees he/she will 1. Reimburse/indemnify CMS Dance Company, Christal Shurley or their insurance company for any money which they paid to participant 2. Will reimburse/indemnify them of their insurance company for any reasonable cost incurred, including attorney’s fees; and 3. Will hold them harmless 4. Will hold harmless and indemnify CMS Dance Company, Christal Shurley or employees from all defense costs, including attorney’s fees, or from any other costs incurred in connection with claims for personal injury, property damage, or wrongful death which the Participant may negligently or intentionally cause to other third parties in the course of participating in the activity. It is the intention of the Participant and/or Responsible Party signing the document to release CMS Dance Company, Christal Shurley, or any of its partners, officers, agents, employees or contractors from any responsibility from personal injury, property damage, or wrongful death whether caused by negligence, carelessness, or otherwise, of the persons or entities mentioned above.

I UNDERSTAND THAT I AM ASSUMING ALL RISKS INHERENT IN CMS Dance Company ACTIVITIES, WHETHER KNOWN OR UNKNOWN, AND THAT BY SIGNING THIS DOCUMENT I AM GIVING UP MY RIGHT TO SUE CMS Dance Company, CHRISTAL SHURLEY, INCLUDING CLAIMS OR DEMANDS BASED ON THE NEGLIGENCE OF CMS Dance Company, CHRISTAL SHURLEY, ITS PARTNERS, AGENTS, EMPLOYEES OR CONTRACTORS.

I VOLUNTARILY SIGN MY NAME EVIDENCING MY ACCEPTANCE OF THE ABOVE PROVISIONS and further agree that no oral representations, statements or inducements apart from this agreement have been made. The release and Waiver of Liability shall be a bar to any recovery by the minor participant and/or his/her parent and/or legal guardian in any action instituted by any of them to recover for loss suffered as a result of participating in these activities. **I HAVE READ THIS DOCUMENT. I UNDERSTAND IT IS A RELEASE OF ALL CLAIMS.**

Parent or Guardian Signature

Print Parent or Guardian Name

Date

Adult Participant Signature

Print Adult Participant Name

Date



Credit Card Authorization and Card on File Form

Please complete all fields.

You may cancel this authorization at any time upon cancellation of your class enrollment. This authorization will remain in effect until written cancellation of class enrollment has been made.

Credit Card Information	
Circle	
Card Type:	<input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Disc <input type="checkbox"/> Amex
Cardholder name:	_____
Card Number:	_____ CVV _____
Exp. Date:	____ / ____
Billing Address:	_____

I, _____, authorize CMS Dance Company, LLC (Owner/Artistic Director Christal Shurley) to charge my above credit card for agreed upon purchases and services. I understand that my information will be saved to file for future transactions on my account. I understand that this authorizes CMS Dance Company to charge the card on file for any billed invoices not paid after 7 days from the due date. This is not an automatic recurring payment agreement. I further understand that any late fees, NSF fees and chargeback fees may be applied to the invoice amount. CMS Dance Company follows PCI requirements for securing cards on file.

Customer Signature

Date

EXHIBIT "B"



WAIVER OF LIABILITY

The undersigned, as the parent or guardian of _____, who is under the age of 18, for and on behalf of the named minor, hereby waives, releases, and discharges Meadow Pointe Community Development District (the "District") from any and all claims, liability or damages arising from any personal injury or harm suffered on District property while participating in any aspect of CMS Dance Company, LLC activities conducted at the Meadow Pointe Community Development District recreation facilities.

READ CAREFULLY BEFORE SIGNING

Signature of Parent or Guardian

Printed Name (of person signing)

Street Address

Date