

ABBA Dance Summer Day Camp  
Student Admission Pre Registration Form

Student Name \_\_\_\_\_

Pre Registration Price is Available until May 31<sup>st</sup>

Level Applying for \_\_\_\_\_ One or Two weeks \_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_ (M/F) \_\_\_\_\_

Previous Dance Experience

\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Allergies \_\_\_\_\_

(parent/ guardian/ emergency contact fill out the following)

Parent/ Guardian/ Contact Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email (please print clearly): \_\_\_\_\_

Address \_\_\_\_\_

**Code of Conduct and Expectations**

Students are to arrive ten minutes before class begins. Students are to be on their best behavior and always keep themselves clean and presentable. Rough language, disrespect, or unkindness of any sort will not be tolerated. Students, siblings, and parents are to respect the venue and are **not to be outside designated areas**. ABBA Dance is a Christian run organization, as such, music, stories, and other materials will be of Christian nature. Those attending ABBA Dance are to be courteous and respectful of Christianity and of the staff involved in the program. In the event of multiple offences of any form, ABBA Dance reserves all rights to remove students from the program. I understand that tuition is non refundable and I waive all rights to compensation for missed days and any other reasons.

**\*\*Tuition for summer camp must be paid within 2 weeks of sending the form to reserve your student's spot. \*\***

I as the STUDENT have read and agree to all of the conditions above:

(Student signature) \_\_\_\_\_

I as the PARENT have read and agree to all of the conditions above:

(Parent signature) \_\_\_\_\_

If you have any questions, please don't hesitate to contact Rachel King @ 440-351-9063 or email @  
abbadanceministry@gmail.com

**\*\*This form must be signed by parents & students in order to attend.\*\***

### **Dress Code**

**Girls-** Hair is required to be in a clean, neat ballet bun (short hair pinned back). Black leotard and pink tights with pink ballet shoes are preferred. Flexible leggings or yoga pants and t-shirts are allowed. No tank tops, bare midriffs, or jeans. If athletic shorts are worn below fingertip length, please.

**Boys-** Hair is required to be either short enough to be out of the face or pulled back neatly. White t-shirts, black shorts or pants, and black ballet shoes preferred. No writing on shirts, shirts must be worn at all times. No tank tops or jeans. If athletic shorts are worn- below fingertip length, please.

### **ABBA Dance Photo Release Form**

I, (Parent/Guardian) \_\_\_\_\_

(please print)

and my child (full name). \_\_\_\_\_ agree and consent as follows:

(please print)

I consent and authorize digital media taken or to be taken and used in any and all of ABBA Dance publications, including print or web-based publications. I permit ABBA Dance to use my likeness in any photograph, video or other media. I irrevocably authorize ABBA Dance to copy, edit, enhance, crop, or otherwise alter any Photo for use in their publications. I waive any rights for approval or inspection of Photos. I understand and agree that all Photos are the property of ABBA Dance and will not be returned to me, I acknowledge that I am not entitled to any compensation or royalties with respect to the use of the Photos. I agree to release and forever discharge ABBA Dance and its affiliates, employees, representatives, and anyone claiming through them, in their individual and/or corporate capacities from any and all claims, liabilities, obligations, promises, agreements, disputes, demands, damages, causes of action of any nature or kind, known or unknown, which I, and anyone claiming on behalf of me, may have or claim to have against release in connection with ABBA Dance.

I have carefully read and understand fully all the provisions of the ABBA Dance Photo Release Form and I am freely, knowingly and voluntarily signing in agreeance:

Child's full name Parent / Guardian Signature Date: \_\_\_\_\_

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RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, ("Participant"), acknowledge that I have voluntarily applied to participate in the following activities at ABBA Dance ( "ABBA Dance"):

(Description of activities, which Participant will engage in) I AM AWARE THAT THESE ACTIVITIES HAVE THE CAPACITY TO BE INJURIOUS. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN. I verify this statement by placing my initials here: \_\_\_\_\_ Parent or Guardian's initials (if under 18): \_\_\_\_\_ As consideration for being permitted by ABBA Dance, the State of Ohio ("State"), the County of \_\_\_\_\_ (the "County"), and any lessor of the fair premises ("Lessor"), to participate in these activities and use the ABBA Dance premises and facilities, I forever release ABBA Dance, the State, the County, the Lessor, any ABBA Dance affiliated organization, and their respective directors, officers, employees, volunteers, agents, contractors, and representatives (collectively "Releasees") from any and all actions, claims, or demands that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives now have, or may have in the future, for injury, death, or property damage, related to (i) my participation in these activities, (ii) the negligence or other acts, whether directly connected to these activities or not, and however caused, by any Releasee, or (iii) the condition of the premises where these activities occur, whether or not I am then participating in the activities. I also agree that I, my assignees, heirs, distributees, guardians, next of kin, spouse and legal representatives will not make a claim against, sue, or attach the property of any Releasee in connection with any of the matters covered by the foregoing release. I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND ABBA DANCE, THE STATE, THE COUNTY, AND THE LESSOR, AND SIGN IT OF MY OWN FREE WILL. If Signed by Parent or Guardian: I verify that the dangers of the activities and the significance of this Release and Waiver were explained to the Participant and that the Participant understood them. I sign below releasing ABBA Dance from any liability on behalf of the child in my care.

PARTICIPANT SIGNATURE

\_\_\_\_\_

RELEASOR PARENT OR GUARDIAN SIGNATURE

\_\_\_\_\_  
Address: \_\_\_\_\_

IF YOU ARE UNDER 18 YEARS OF AGE, YOU AND YOUR PARENT OR GUARDIAN MUST SIGN AND INITIAL THIS FORM WHERE INDICATED.