


**EVOLVE DANCE REGISTRATION**

**For Office Use Only:** Membership Date \_\_\_\_\_  
 Evaluation Date \_\_\_\_\_  
 Evaluation Time \_\_\_\_\_  
 Student Number \_\_\_\_\_

**CONTACT INFORMATION**

Parent / Guardian Names: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

\_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

**Parent/Guardian 1 (preferred contact)**

Name \_\_\_\_\_ Cell \_\_\_\_\_

**Parent/Guardian 2 name (if applicable)**

Name \_\_\_\_\_ Cell \_\_\_\_\_

**Emergency Contact**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Email**

*\*\*Email is the primary source of communication to academy families. Please add info  
 EvolveDanceUtah@gmail.com to your address book in order to help ensure you receive these messages. \*\**

Primary email: \_\_\_\_\_ Secondary email: \_\_\_\_\_

How did you hear about Evolve? \_\_\_\_\_

\_\_\_\_\_

**STUDENT INFORMATION****Student 1**

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Age \_\_\_\_\_

Academic School \_\_\_\_\_ Grade \_\_\_\_\_

Medical Info/Limitations \_\_\_\_\_ Insurance Info \_\_\_\_\_

Previous Training (# of years and location) \_\_\_\_\_

Please list the dance classes you are enrolling your child in:

#1: \_\_\_\_\_ #2: \_\_\_\_\_

#3: \_\_\_\_\_ #4: \_\_\_\_\_

#5: \_\_\_\_\_ #6: \_\_\_\_\_

**Student 2 (if applicable)**

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Age \_\_\_\_\_

Academic School \_\_\_\_\_ Grade \_\_\_\_\_

Medical Info/Limitations \_\_\_\_\_ Insurance Info \_\_\_\_\_

Previous Training (# of years and location) \_\_\_\_\_

Please list the dance classes you are enrolling your child in:

#1: \_\_\_\_\_ #2: \_\_\_\_\_

#3: \_\_\_\_\_ #4: \_\_\_\_\_

#5: \_\_\_\_\_ #6: \_\_\_\_\_

**EVOLVE DANCE & PERFORMING ARTS L.L.C. WAIVER AND RELEASE OF ALL CLAIMS AND PERMISSION TO SECURE TREATMENT**

Please read this form carefully. Be aware that in registering yourself or your minor child / children in any dance, arts, tumbling or fitness class at Evolve Dance & Performing Arts, you will be waiving and releasing all claims for injuries you or your minor child / children might sustain arising from participating in such activities.

I recognize and acknowledge that there are certain risks of physical injury to participants in classes at Evolve Dance & Performing Arts (hereafter referred to as EDPA), and I agree to assume full risk of injuries, damages, or loss regardless of severity which I or my minor child/ children ward / wards may sustain as a result of participating in any and all activities at EDPA.

By my signature below, I certify that I and/or my minor child / children are physically able to participate in classes and do hereby agree that this business, owners, employers, contractors, assistants or agents are not responsible or liable to me for any injury, accident, or loss of personal property. I, for myself and my minor child / children, do hereby release this business and its employees, contractors, assistants, owners and agents from any claim or cause of action which may have occurred as a result of participation in classes or as a result of any medical problem known or unknown of which I have knowledge presently or in the future. I agree to waive and relinquish all claims that my minor child or I may have against EDPA and its owners, agents, employees, contractors, instructors, and assistants as a result of participating in classes at EDPA.

I further agree to indemnify and hold harmless and defend EDPA, and its owners, agents, employees, contractors, instructors, and assistants from any and all claims resulting from injuries, damages and losses sustained by me or my minor child / children arising out of, connected with, or in any way associated with classes at EDPA.

In the event of an emergency, I authorize EDPA or its agents to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed necessary for me or my minor child's / children's immediate care and agree that I will be responsible for payment of all hospital and medical charges which are incurred. I recognize and acknowledge that EDPA or its agents will not be responsible for honoring specific hospital or healthcare provider preferences.

I hereby give EDPA the absolute right and permission to use my and/or my minor child's name, image, interview, performance or other auditory or visual image as a EDPA participant and copyright and/or publish, or use pictures, or videotapes, of me and/or my minor child of which the inclusion is in whole or in part, made through any media or Internet website at its studios or elsewhere, for research, education, advertising, trade or any other lawful purpose whatsoever whether taken in the classroom, prior to, or after class, at a Studio event, or a dance performance, dress rehearsal, or dance recital and whether these events are within, pre, or post the enrolled semester. I hereby waive any right that I may have to inspect and/or approve the finished product that may be used in connection therewith, or the use to which it may be applied.

I will receive a copy of the 2020-21 EDPA Studio Handbook. I understand that it is my responsibility to read and follow all policies stated therein as well as any and all information posted on the Evolve Dance & Performing Arts website and emails as well as all rules and policies which, through necessity, may be instituted throughout the year.

I have read and fully understand the above Waiver and Release of All Claims and Permission to Secure Treatment.

\_\_\_\_\_  
Signature of Parent/Guardian for participants under 18 years of age Date

\_\_\_\_\_  
Students Signature (if student is over 18) Date

\_\_\_\_\_ Birth Date of Student \_\_\_\_/\_\_\_\_/\_\_\_\_

Printed Student Name

**IMPORTANT NOTICES:** (please initial all)

\_\_\_\_\_ PROMPTNESS: Students must be on time for class. Dancers arriving more than 15 minutes late, missing warm-up exercises, will be asked to sit and takes notes instead of being allowed to participate in class. We suggest you arrive 10 minutes prior to your class to have time to change, stretch and prepare for the class.

\_\_\_\_\_ THERE ARE NO REFUNDS, TRANSFERS, CREDITS OR EXTENSIONS given for classes missed.

\_\_\_\_\_ MAKE-UP CLASSES must be made when a dancer misses choreography of a class. The dancer has the option of either getting with another student for instruction, watching a teacher video or taking a private lesson to make up the choreography missed. If a student misses too many classes, the teacher may request private lessons to make up the students lessons in order to be caught up with the class.

\_\_\_\_\_ DRESS CODE must be adhered to at all times, including hair. Please wear street clothes over your dancewear when outside of the studio. This is for the safety of you and your children. Street shoes must be worn to and from the studio. No dance shoes outside.

\_\_\_\_\_ APPROPRIATE BEHAVIOR and respect is expected at all times, towards the EDPA staff, other students and any and all visitors to the studio. EDPA reserves the right to dismiss those not adhering to this policy.

\_\_\_\_\_ TUITION DUE DATE & LATE FEE: Tuition is due on the 30th of each month for the following month. All drops or withdrawal requests must be received in writing prior to the 23rd of the preceding month, and no refunds are given once payment has been received. Tuition is non- transferrable. If, for whatever reason, we have not received payment by the 5th of the month, a late fee of \$20 will be assessed.

\_\_\_\_\_ For any desired drops or withdrawals, a WRITTEN DROP/WITHDRAWAL FORM must be filled out and given to the office staff prior to the 23rd of the preceding month. If notice is given VIA EMAIL, please make sure that you receive confirmation that your request has been processed. Families are responsible for all enrolled class fees regardless of attendance.

\_\_\_\_\_ PARENTS' RESPONSIBILITY TO BE AWARE OF DATES AND EVENTS: It is the responsibility of the parent or adult student to be aware of the school activities such as recitals and dates the school is open and closed. Parents will receive a calendar at the beginning of the dance year. The school will post notices online and through the email mailing list. For students participating in recitals, it is the parent or adult students' responsibility to be aware of all applicable dates and deadlines. Please inform the studio of any address, telephone, and email changes.

\_\_\_\_\_ CHILD PICK-UP: Please pick up your child after their class or classes have been completed. Please do not leave your child at Evolve Dance & Performing Arts any longer than ten minutes after their class schedule has finished. THANK YOU.

## **EVOLVE 2020 LIABILITY FORM**

**Please read. Initial each item below. Sign back of form and return to Evolve.**

\_\_\_\_\_ **I understand that** . . . students who show any symptoms of sickness such as fever, headache, cough, shortness of breath, rash, chills, muscle pain, sore throat, or loss of taste or smell should NOT come to school. If an employee or student comes to school, and is found with any of the above symptoms, they will be separated from the class and sent home.

\_\_\_\_\_ **I understand that** . . . if the student or a member of the student's family is exposed to someone with Covid-19 virus, they should NOT come to school and should contact the school. If they find out they have been exposed and were at school, they need to contact the school immediately.

\_\_\_\_\_ **I understand that** . . . students who come to the school will have their temperature taken with a non-contact thermometer and recorded every day. Students found with a temperature will not enter the classroom.

\_\_\_\_\_ **I understand that** . . . students will need to use hand sanitizer between teaching stations. KPA will provide CDC approved alcohol strength sanitizer for use at the school.

\_\_\_\_\_ **I understand that** . . . due to the nature of our business and the young age of our students, cloth masks will not be worn at school and social distancing between students in the same class will not be enforced. However, class sizes will be limited to a smaller group of children throughout the teaching day. Classes will stay in one room for all the activities and then move to another room the following day after that room has been sanitized.

\_\_\_\_\_ **I understand that** . . . parents will not be allowed in the building. To once again reduce the number of people employees and students come in contact with, we will limit occupants to just teachers, staff, and students.

\_\_\_\_\_ **I understand that** . . . students will bring a small snack from home to eat during snack time for their safety. Snacks will not be provided and will not be shared between students. Please remember we are a nut free

zone and cannot have snacks brought to school with nuts.

\_\_\_\_\_ **I understand that** . . . students will need to bring a water bottle every day to school. The water fountain will not be accessible to students or staff.

\_\_\_\_\_ **I understand that** . . . teachers will wear plastic shields and make it a part of the fun so as not to worry the children. Children will not be forced to wear a mask. Employees will spray sanitize each teaching area after students move to another station to prepare it for the next group of students

\_\_\_\_\_ **I understand that** . . . if my student is home sick, I will inform the school of the nature of the illness and keep the school updated as I monitor the situation. Evolve Dance & Performing Arts will continually consult with local health authorities regarding cases in the area and notify families immediately if there is a case within the facility.

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is reported to be extremely contagious. The state of medical knowledge is evolving, but the virus is believed to spread from person-to-person contact and/or by contact with contaminated surfaces and objects, and even possibly in the air. People reportedly can be infected and show no symptoms and therefore spread the disease. The exact methods of spread and contraction are unknown, and there is no known treatment, cure, or vaccine for COVID-19. Evidence has shown that COVID-19 can cause serious and potentially life threatening illness and even death.

Evolve Dance & Performing Arts cannot prevent you [or your child(ren)] from becoming exposed to, contracting, or spreading COVID-19 while utilizing Evolve Dance & Performing Arts’ services or premises. It is not possible to prevent against the presence of the disease. Therefore, if you choose to utilize Evolve Dance & Performing Arts’ services and/or enter onto Evolve Dance & Performing Arts’ premises you may be exposing yourself to and/or increasing your risk of contracting or spreading COVID-19.

**ASSUMPTION OF RISK:** I have read and understood the above warning concerning COVID-19. I hereby choose to accept the risk of contracting COVID-19 for myself and/or my children in order to utilize Evolve Dance & Performing Arts’ services and enter Evolve Dance & Performing Arts’ premises. These services are of such value to me [and/or to my children,] that I accept the risk of being exposed to, contracting, and/or spreading COVID-19 in order to utilize Evolve Dance & Performing Arts’ services and premises in person [if applicable: “rather than arranging for an alternative method of enjoying the same services virtually (e.g. videoconference)].

**WAIVER OF LAWSUIT/LIABILITY:** I hereby forever release and waive my right to bring suit against Evolve Dance & Performing Arts and its owners, officers, directors, managers, officials, trustees, agents, employees, or other representatives in connection with exposure, infection, and/or spread of COVID-19 related to utilizing Evolve Dance & Performing Arts’ services and premises. I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

**CHOICE OF LAW:** I understand and agree that the law of the State of Utah will apply to this contract. I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE:

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

Name (printed): \_\_\_\_\_

I am the parent or legal guardian of the minor named above. I have the legal right to consent to and, by signing below, I hereby do consent to the terms and conditions of this Release.

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

Name (printed): \_\_\_\_\_