



**STUDIO 413 DANCE COMPANY
AUDITION ENTRY FORM 2019-2020**

Name _____

Parent Name(s) _____

Address _____

City _____ **State** _____ **Zip Code** _____

E-mail address (if different than the one on file)

Parent Cell Number _____

Date of Birth _____ **Dancer's age as of January 1, 2020** _____

Grade Entering 2019-2020 _____ **School attending** _____

Liability Disclaimer

I, the undersigned parent/legal guardian of the dancer listed above do hereby give permission for the aforementioned persons to participate in any class, program, shows and events, auditions offered by or attended by Studio 413. I accept all the risks associated with that participation and understand that there is full possibility of serious physical illness, injury or death. I hereby covenant not to sue and waive, release and forever discharge any and all rights and claims and damages, which may arise now and in the future against Studio 413, its officers, owners, directors, employees and/or other assigned representatives or volunteers from any and all liability for any and all damages and /or injuries that may be sustained or suffered by the dancer(s) listed above while participating at or for Studio 413. Furthermore, I hereby give my permission to Studio 413 to use photographs and/or videos of the dancer(s) listed above as deemed appropriate for the promotion of Studio 413.

I have read and understand the financial and time commitment required by being a part of the Studio 413 Dance Company.

Print Name _____ **Date** _____

Signature _____ **Date** _____