



DANCER REGISTRATION FORM

One form per dancer. Please print clearly and complete both sides.

Please Note: There is a 2 hour minimum attendance requirement per registrant – your specific time slot will be coordinated at a later date and we will take into account your preferred scheduling. However, each dancer is welcome to stay for the duration of the event and encouraged to attend the opening and closing ceremonies.

1. General Information

Dancer's Name: _____	Last Name: _____				
Age: _____ (at time of event)	Home Phone: _____				
Parent Name & Contact: _____					
Email Address: _____	Emergency Contact #'s: _____				
Please include your email address so we can send you important event details and updates.					
<u>T-SHIRT SIZE – PLEASE INDICATE</u>					
YOUTH	small (size 8)	medium (size 10)	large (size 12)		
WOMEN'S	small	medium	large	ex-large	
MEN'S	small	medium	large	ex-large	xx-large
(T-shirts will be issued at the commencement of the event)					

2. Registration

Registered Dancers commit to raising a minimum of \$50 benefiting the “Free the Children” organization. Please have your parents submit your non-refundable \$25 registration fee with your registration form. This fee does not apply toward your fundraising commitment and is not tax deductible. Cash or cheque made payable to “Spiral Dance Fundraising.”

Please turn over and complete the other side 

3. Parental Consent Form (Please read and sign below)

I am a parent or legal guardian of the above-named child. I have read the foregoing Waiver and Release, understand it, and agree and consent to its terms.

I hereby give permission to the provision of any necessary emergency medical treatment for the child named above. I understand that every effort will be made to contact me. However, in the case of an emergency, if I cannot be reached, I hereby give Spiral Dance Co. and its representatives for this event, permission to act on my behalf in seeking medical treatment by qualified personnel for the child named above, in the event that such treatment is deemed necessary or advisable for the child's health, safety and welfare. I release the Permitted Parties and all medical providers from liability in acting on my behalf in this regard in rendering such medical treatments.

I understand that by participating in Spiral's ROKCKFEST 2010, the child named above has agreed to raise funds and participate in a dance-a-thon. I understand that there are certain risks, whether such risks are known or unknown to me at this time. I further release the Permitted Parties, including their respective directors, volunteers, employees and agents, from any claim that I, or the above named child, may have against them as a result of fundraising for or participating in this event.

In consideration of your accepting the above named child for participation, I hereby, for myself, my family, my heirs, executors and administrations, waive and release any and all rights and claims for damages that I may have against the Permitted Parties and their heirs directors, volunteers, employees and agents, for any and all injuries suffered by myself or the above named child that arise out of this event.

I understand that my child may be photographed/filmed at this event either by parents, staff or a photographer acting with the permission of Spiral Dance. I understand that this footage may be used in newsletters, posted on a website or submitted to various sponsoring agencies or organizations when we report on this event. These images may be used by these organizations. I also understand that media may attend this event. I give permission for my child to be photographed, or their images recorded for print or broadcast by media representatives who attend.

Signature of parent or guardian (please print name also)

Date

Office use only: \$25.00 Registration Fee: Cash or Cheque # Parental Consent

Date Received:

Received by: