# Garth Fagan Dance School

## Spring/Summer 2022 Registration Form

### Children's Classes (Saturdays): May 7th to June 25th
- Age: 3-4 Class [ ]
- 5-7 Class [ ]
- 8-12 Class [ ]

### Teen & Adult Classes (Tuesdays & Thursdays): May 3rd to June 30th
- Pay per class: $20
  - 1 Class a week: $195 semester rate
  - 2 Classes a week: $375 semester rate
  - Beginning Technique [ ]
  - Int/Adv Technique [ ]

### Adult Community Classes (Tuesdays, Thursdays & Saturdays): May 3rd to June 25th
- Pay per class: $20
  - 1 Class a week: $240 semester rate
  - 2 Classes a week: $465 semester rate
  - 3 Classes a week: $665 Semester rate
  - Adult Community Class (Tues.) [ ]
  - Adult Community Class (Thurs.) [ ]
  - Adult Community Class (Sat.) [ ]

### Under 10 Student Ensemble [ ]
- Semester rate: $75 (1/2 off)

### 10+ Student Ensemble [ ]
- Semester rate: $195 (1/2 off) (Wed./Thurs.)
- Free and Mandatory Rehearsals (Sat.)
- Min. one technique class per week

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Please contact the Garth Fagan Dance School (GFDS) office at (585)454-3260 with further questions.  
All tuition includes a $15 registration fee.

### Student Information

- **Student Name:** ________________________________
- **Parent/Guardian Name:** __________________________
- **Permanent Address:** ________________________________  
  - City: __________ State: ______ Zip Code: __________

### Contact Information

- **Primary Phone:** ____________________________
- **Other:** ____________________________
- **Work Phone:** ____________________________

### E-mail Addresses:

- **Parent:** ____________________________
- **Student:** ____________________________
- **Other:** ____________________________

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In case of emergency, please contact: ____________________________

Primary phone number(s): ____________________________

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- **Student Age:**
- **Dance Experience:**
- **How did you learn about GFDS:**
- **Student Gender:** M [ ] F [ ]
- **Years with GFDS:**
- **Student Ensemble Member:** Y [ ] N [ ]

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OVER ☐
The following is **OPTIONAL** and will be *used for funding purposes only*:

**Ethnic Origin:**

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<thead>
<tr>
<th>Ethnicity</th>
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<th>Ethnicity</th>
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<tbody>
<tr>
<td>African American</td>
<td></td>
<td>Asian/Pacific Islander</td>
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<tr>
<td>Caucasian</td>
<td></td>
<td>Native Indian/American</td>
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<tr>
<td>Latino/Hispanic</td>
<td></td>
<td>East Indian</td>
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<tr>
<td>Bi-racial</td>
<td></td>
<td>West Indian</td>
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**Payment:**

- [ ] Cash
- [ ] I’ve enclosed a check made payable to Garth Fagan Dance.
- [ ] Please charge my credit or debit card (please circle one).

**Amount $__________

**Card Type (circle one):** Visa  MC  AmEx  Discover

**Name:** __________________________ **Address:** __________________________

**Card Number:** ___________  **Expiration Date:** ___________  **CVV Code:** ________

**Email:** ____________________
Release Form

Student name: __________________________ Date: ______________________

VERY IMPORTANT: If the student has a medical condition of which we need to be aware, such as allergies, daily medications, disabilities etc., please indicate this in the space provided below:

________________________________________________________________________

________________________________________________________________________

I __________________________ (the student) expressly assume the risk of participating in Garth Fagan Dance school classes and performances and on behalf of me and my heirs, executors and assigns, I release and agree to indemnify and hold harmless Garth Fagan Dance and its officers, agents, and staff from any and all claims, demands, causes of action, suits, losses, or damages resulting from or arising out of my participation in Garth Fagan Dance school classes and performances, including without limitation all claims, demands, causes of action, suits, losses, or damages due to my injury or death during my participation in the classes and performances. Garth Fagan Dance may use or reproduce any written materials submitted by the students and all photographs or videos taken of the Garth Fagan Dance students, without mutual agreement or compensation. Images may be reproduced for publicity or advertising by Garth Fagan Dance or its agents.

Student Signature (18 years or older): ______________________________________

PARENTAL AGREEMENT

I give consent for my child __________________________ to take part in all Garth Fagan Dance school classes, as well as in performances outside of Garth Fagan Dance property under proper supervision and on behalf of my child and my heirs, executors and assigns, I release and agree to indemnify and hold harmless Garth Fagan Dance and its officers, agents, and staff from any and all claims, demands, causes of action, suits, losses, or damages resulting from or arising out of my child’s participation in Garth Fagan Dance school classes and performances, including without limitation all claims, demands, causes of action, suits, losses, or damages due to my child’s injury or death during his/her participation in the classes and performances. I have provided the staff with any pertinent information regarding the health of my child including but not limited to allergies, previous or existing illnesses or condition, long term medications, disability or limiting conditions or emotional, development, or behavioral challenges. I agree to notify Garth Fagan Dance School immediately of any change of address, telephone numbers, place of employment, emergency contact, etc. I understand that by not providing the above information, I may put my child’s health and safety at risk. Garth Fagan Dance may use or reproduce any written material submitted by the students and all photographs or videos taken of the Garth Fagan Dance students, without mutual agreement or compensation. Images may be reproduced for publicity or advertising by Garth Fagan Dance or its agents.

Parent/Guardian Signature: ________________________________________________