

Welcome to fireworks Dance Center!

We're Glad You're Here!



Special Event Release Form ★ PLEASE PRINT LEGIBLY

Today's Date _____

Child's Name _____ Birthdate _____ Age _____

Your Name _____ Relationship to Child _____

Phone Number At Which You Can Be Reached During Today's Party _____

Any special needs or allergies of which our staff should be aware? _____

Your E-mail address _____

Check here if you do not want to be added to the FDC e-mail mailing list*

Street Address _____

City _____ State _____ Zip Code _____

Your privacy is important to us! FDC does not spam, and we do not sell or give away any of our clients' information. We will send an occasional e-mail that lists the current events happening at the studio. You may easily opt out of receiving those e-mails at any time.

RELEASE OF LIABILITY

I understand that activities at Fireworks Dance Center, Inc. are physical and with all physical activities, injuries are possible. I understand and will not hold Fireworks Dance Center, Inc. or its teachers responsible for any injury or loss that may occur. When sending your child to Fireworks Dance Center, Inc. I understand my child should be covered by my own insurance and I will not hold Fireworks Dance Center, Inc. responsible for accidents that may occur. It is agreed that participating in any class taught or organized activity at Fireworks Dance Center is undertaken at the sole risk of the student. Students, parents, and guardians hereby agree to hold harmless, release, and forever discharge Fireworks Dance Center, its employees, contractors, consultants, advisors, and owners from any and all claims for injury or damage to the student's, parents', guardians' and visitors' person or property arising out of or in connection with participation in any event or class taught by Fireworks Dance Center and from all acts of active or passive negligence on the part of Fireworks Dance Center and any of its employees, contractors, consultants, advisors, and owners.

SIGNATURE (must be over age 18) _____ DATE _____

PRINTED NAME _____

PHOTO RELEASE

Fireworks Dance Center is given all rights to use photos/videos for promotional use. I give Fireworks Dance Center, Inc. permission to photograph me and my child and to use the photographs around the facility and as a promotional tool.

SIGNATURE (must be over age 18) _____ DATE _____



Like us on Facebook to stay informed of up-to-date news, class schedules, promotions, and prizes:

Fireworks Dance Center ★ We Love To See You Shine!

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www.fireworksdance.com★