

# Adult Registration Form - Petrov Ballet School

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Tel: (201) 445-4499

Email: [info@petrovballet.com](mailto:info@petrovballet.com)

Web: [www.petrovballet.com](http://www.petrovballet.com)

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

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

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact Name/Phone \_\_\_\_\_

Please list any health concerns, medications, allergies, etc: \_\_\_\_\_

How did you hear about Petrov Ballet School?

Friend

Phonebook

Flyer

Newspaper

Other

Web Search

I have read completely, understood fully, and agree to all of the Petrov Ballet Studio financial and other policies. **Initial here:** \_\_\_\_\_

**I, (state full name)** \_\_\_\_\_, fully understand, recognize and am aware of the risk and hazards involved in the activities of dance provided by Petrov Ballet School. I acknowledge, agree and represent that I understand the nature of such activities and that I am of the opinion that I am qualified, in good health, and in proper physical condition to participate in any and all activities provided by Petrov Ballet School. I hereby discharge, covenant not to sue and release Petrov Ballet School LLC, its agents, directors, employees, volunteers and all other associates from any and all liability, claims, responsibility for any and all harm and injury which may be sustained by me during attending class or participation in activities and programs sponsored and directed by Petrov Ballet School, LLC. I hereby give my consent to Petrov Ballet School, LLC for photographs and/or video of above named student to be used for promotional purposes in newspapers, on TV and on the Website (s) at anytime for any reason. I waive any and all right to payment (s) for use of these photographs and /or video. I understand that this waiver does not expire.

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