

# Fusion Studio of Dance 2023 Summer Dance Registration Form

*"The fusion of movement and expression through dance"*

4220 Coonpath Rd. Carroll, OH 43112

Fusionstudioofdance@yahoo.com/fusionstudioofdance.com

**740.407.1174**

***There must be at least 3 students registered for each class or students will be placed in a similar class or the class will be cancelled. Also, class sizes may be limited. First come, first serve.***

**PAYMENT DUE AT TIME OF REGISTRATION TO HOLD CLASS SPOT, no exceptions.**

Student Name: \_\_\_\_\_ Student Email: \_\_\_\_\_ Student Phone: \_\_\_\_\_

Student Age: \_\_\_\_\_ Student Date of Birth: \_\_\_\_\_ Grade of School going into: \_\_\_\_\_

Dance Experience, please be specific: \_\_\_\_\_

Medical History/Injuries: \_\_\_\_\_

Food Allergies: \_\_\_\_\_

Parent/Guardian Names \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_ Ext. \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Emergency Contact: (Other than parents – **PLEASE PROVIDE** Name, Phone #, Relationship to student)

How did you hear about us: \_\_\_\_\_ Who referred you to FSD? \_\_\_\_\_

**Class Registration:** Circle below all classes in which you are registering.

*See all days/times on the schedule found on fusionstudioofdance.com.*

## 6 Week Session Classes

**Week of July 10-August 17**

*(Each class is \$55.00 for the session)*

Pre-Professional	Creative Movement	Jazz, Intermediate
Ballet 4-6 Beginner	Jazz Pom/Sideline, Advanced	Jazz Turns/Leaps 7+, Beginner/Int. <i>(must have previous jazz training)</i>
Ballet 7+, Intermediate	Hip Hop, Beginner	Jazz Turns/Leaps, Advanced
Ballet 11+, Intermediate	Hip Hop, Intermediate	Jazz, Advanced
Ballet, Advanced	Hip Hop, Advanced	Stretch/Conditioning 7+, Beginner/Int. <i>(must have previous dance training)</i>
Ballet Variations, Advanced	Tap, Beginner	Stretch/Conditioning, Advanced
Ballet Turns/Leaps, Advanced	Tap, Intermediate	Contemporary, Beginner
Ballet Turns/Leaps, Intermediate	Tap, Advanced	Contemporary, Intermediate
+Pre-Pointe (Director Approval)	Acrobatics, Beginner	Contemporary, Advanced
+Pointe I (Director Approval)	Acrobatics, Intermediate	Contemporary Movement, Advanced
+Pointe II (Director Approval)	Adult Class	
<i>(+all pointe classes must take an additional 2 ballet classes)</i>	Jazz, Beginner	

## Advanced Workshops – Every Thursday 7:00-8:30p

*(Each workshop is \$25.00 – Bonus: Take all 6 for \$125.00)*

*See website for description of each workshop*

**Thursday, July 13 – College Dance Team**

**Thursday, July 20 – Ballet Intensive**

**Thursday, July 27 – Leaps and Turns**

**Thursday, August 4 – Dancing For The Camera**

**Thursday, August 10 – Dancing In Heels**

**Thursday, August 17 – Musical Theater**

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**Summer Tuition Total: \$** \_\_\_\_\_ (Please provide cash or check payable to "Fusion Studio of Dance")

Office Use Only - Notes: \_\_\_\_\_ FSD Staff: \_\_\_\_\_

Date tuition was paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Cash or Check #: \_\_\_\_\_

**Fusion Studio of Dance Liability**  
**Waiver and Acknowledgment of Risk:**

**READ AND SIGN BELOW.**

**REGISTRATION IS INCOMPLETE WITHOUT SIGNATURE AND MUST BE COMPLETED BEFORE PARTICIPATING IN ANY CLASS.**

I, \_\_\_\_\_, am the parent/legal guardian of the participant(s),  
\_\_\_\_\_.

I understand and agree that in participating in any dance class, workshop, rehearsal or performance, there is a possibility of physical injury or death. I voluntarily agree, therefore, to assume all risks and responsibility for any such injury or accident, which might occur to me or my child during any of Fusion Studio of Dance classes, rehearsals, performances, or activities. I also exempt, release, and indemnify Fusion Studio of Dance, its owners, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students from any and all liability claims, demands, or causes of action whatsoever from any damage, loss, injury, or death to me, my children, or property which may arise out of or in connection with participation in any classes or activities conducted by Fusion Studio of Dance. I further hereby voluntarily agree to waive my rights and that of my heirs and assigns to hold Fusion Studio of Dance, its owners, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students liable for such damage, loss, injury, or death. I understand that I should be aware of my physical limitations and agree not to exceed them. If I am signing this waiver for my children, I certify that I am the parent or legal guardian and have the right to waive these rights.

\*Permission is granted to Fusion Studio of Dance to use photographs/videos of students for publicity purposes.

**COVID Exposure Procedures:**

1. In the event that an FSD dancer or family member contracts Covid-19, we will refer to the guidelines set forth by our local officials.
2. Dancers who test positive for Covid-19 must remain home until they have been cleared by a doctor and must provide doctor documentation.

I have read this document and I understand and will follow Fusion Studio of Dance's set procedures.

By signing this document, I allow my child to participate in dance classes at Fusion Studio of Dance, LLC. I understand that I am responsible for the obligations and acts of the participant as described in this document. I agree to be bound to this document.

I understand the risk associated with this activity such as illness, including exposure to Covid-19 and will not hold Fusion Studio of Dance, LLC responsible in the event of exposure.

I hereby agree that I will not send my child to Fusion Studio of Dance, LLC in the event that they or any household member tests positive for Covid-19 or is showing symptoms of Covid-19.

Parent/Guardian Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Date: \_\_\_\_\_ Child's Name: \_\_\_\_\_