

SUMMER 2019

REGISTRATION FEE

Summer Camp Registration Fee is \$25 for one student and \$40 for a family of 2 or more students residing in the same household.

Registration fees are waived if students are registered before April 11, 2018

POLICIES:

EXTREME WEATHER OR UNEXPECTED INTERRUPTION OF LESSONS: No refunds for lessons missed due to the cancellation of lessons because of events outside our control such as power outages, hurricanes, etc.

_____ (Initial here)

MEDICAL CONDITIONS: Before registering a student, it is the student's legal guardian's responsibility to inform the school of any medical condition of the student that may interfere with a normal teaching process. We are a private school, and our teachers are not trained to work with students with certain disabilities.

_____ (Initial here)

SUBSTITUTIONS: Organic Movements reserves the right to provide a substitute teacher for any group lesson without prior notification. If the school cannot arrange a substitute teacher, any missed lessons will be made up by your regular teacher.

_____ (Initial here)

PHOTO & VIDEO RELEASE: I understand that Organic Movements retains the rights to use any photographs, video tapes, or any other record of events for publicity, advertising, or legitimate purposes. _____ (Initial here)

IT IS THE RESPONSIBILITY OF THE PARENTS OR ADULT STUDENTS TO BE AWARE OF ALL SCHOOL ACTIVITIES: The school will post all such notices on the front door, on the bulletin board, on the Organic Movements web site, as well as sending notices home with the students.
______(Initial here)

INJURIES: Parents, legal guardians and students waive the right to any legal action for any injury sustained on school property resulting from normal lesson activity or any other activity conducted before, during or after lesson time.

_____ (Initial here)



REFUNDS: ALL TUITION AND FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE ______ (Initial here)

By signing my name below, I agree to the above and below terms as stated:

I recognize the potential for injury in physical activities such as dance, yoga, Pilates, gymnastics and other forms of movement. Being fully aware of these dangers, I voluntarily give consent for my child/children to participate in all Organic Movements' programs and accept all risks associated with that participation. I, on my own and my child's behalf (and all respective successors), forever release Organic Movements and all staff of said establishment from any and all liability and damages associated with any injuries incurred while my child/children are under the instruction, supervision, or control of Organic Movements. If any disagreement is to be settled in a court of law, I will be responsible for any and all Organic Movements lawyer fees, court fees and any other legal fees that may arise associated with my disagreements.

I agree that I have read the above policies and fully understand them. I have also received and understand the studio policies. I have read and understand the acknowledgement of risk and waiver of liability and I volunteer to affix my name in agreement and of the policies and regulations stated therein.

I/We give permission for a licensed doctor or physician to administer any necessary medical attention immediately to our child, and to do so without having to wait until I/we are contacted.

Student's Name: ______

Print Legal Guardian's Name

Signature

Date



Student Release Form

Student:_____

My child may be release to the following people:

NAME:	RELATIONSHIP:	PHONE NUMBER:

Parent(s) Name:	
Parent's Cell Number(s):	
Parent's Signature:	Date: