



*A Dynamic California based
Mexican folk and
contemporary Dance
Company.*

NEW STUDENT APPLICATION: (PLEASE PRINT CLEARLY)

Date/Fecha: _____

Student Name/Nombre de estudiante: _____

Parent name if under 18yrs: _____

Nombre de padre si estudiante es menores:

Address/Domicillio: _____

Phone Number/Numero: _____

Cell Phone: _____

Email address: _____

DISCLAIMER/WAIVER OF LIABILITY:

The undersigned acknowledges that the participation in dance, workshops, rehearsal and performance involves strenuous physical activity and that Calidanza Dance Company and its employees will not be held responsible/liable for injury of any kind as a result of participation including classes, shows, workshops or events. I voluntarily agree to assume all risk and responsibilities for any injury or accident which may occur while at Calidanza dance studio or designated area. I further hereby voluntarily agree to hold harmless Calidanza Dance Company, its owners, agents, volunteers, assistants, employees, guest artist and or other students for loss, injury, or death. **If I am signing this waiver for my child, I certify that I am the parent or legal guardian and have the right to waive these rights.**

I HAVE READ THE ABOVE, UNDERSTAND AND AGREE:

PRINT NAME: _____

SIGNATURE: _____ DATE _____