

NATIONAL REGISTRATION FORM

Please print 2 copies (one for your records and one to send), fill out all information, include this form **Deposits are Non-refundable** / **Werkshop admittance based on first-come-first-served.**

WITH DOWN PAYMENT BY JUNE 20, 2024 - CHECK MADE PAYABLE TO DANCEWERKS - SEND TO:

Balance of Full Payment Due: July 10, 2024

DANCEWERKS 616 South Street Barrington, Illinois 60010 847.382-1699

CLASS SIZES ARE LIMITED

Please print out form and fill out completely:		(DOWN PAYMENT) ↓
• 4-DAY MAIN CAMP	\$485	(\$300)
Chicago Day of Dance (must be enrolled in Main Camp / ages 13 and up)	\$125	(\$ 60)
 Digital Media Package – Video of Finale Performance & highlights (discounted rate: \$30.00 - AFTER July 1: \$45.00) 	\$\$30	
TOTAL AMOUNT OF ENCLOSED CHECK & CHECK NUMBER	Check #	\$
REMAINING BALANCE to be paid by July 10th	(Balance owed)	\$
STUDENT NAME		_AGE
ADDRESS		
CITY STATE Z	IP	
PHONE STUDIO NAME		
EMAIL ADDRESS (print neatly)		
DANCEWERKS COMPLIMENTARY CAMP SHIRT (Ma	in Camp only) SIZ	ZE (circle one)
MALE FEMALE CS CM CL A	AS AM A	AL AXL
(SHIRTS ARE <u>NOT</u> EXCHANGE.	ABLE!)	

RELEASE FORM

Please read this form carefully and be aware that in signing up and participating in DancewerksLLC programs, you will be waving and releasing all claims for injuries you might sustain arising out of this program. As a participant in the DancewerksLLC programming, I recognize and acknowledge that there are certain risks of physical injury, and I agree to assume the full risk of injuries, damages or loss, which I may sustain as a result of participating in any and all activities with or associated with such programs. I agree to waive and relinquish all claims that I may have as a result of participating in the programs against DancewerksLLC, and any participating facilities, and its officers, agents, servants, and employees, and independent contractors. I do here by release and discharge DancewerksLLC, and its officers, agents, servants, and lawyers and independent contractors from any, and all claims from injuries, damage, or loss, which may accrue/occur to me on account of my participation in the programs. Including transportation, services, and vehicle operations, when provided. I further agree to indemnify and hold, harmless and defend DancewerksLLC and its officers, agents, servants, and employees and independent contractors from any, and all claims, resulting from injuries, damages, and losses sustained by me, and arising out of, connected with, or in any way associated with the activities of the programs. I agree to the terms of the photo video policy. I have read and fully understood the above program details and waiver and release all claims. Participants or their legal guardian, must sign this waiver. DancewerksLLC will consider a facsimile signature as original.

PARENT/GUARDIAN SIGNATURE