UNITEDDANCE

REGISTRATION FORM BOSTON 8-9 JUNE 2019

Please send this form filled in, along with a portrait picture to uniteddance@mail.com

PARTICIPANT INFORMATION

O Mr O Ms/Mrs First name: Last name:

Please send us a portrait picture along with your application form

Birth date: / /

Street address:

City:

State: Zip: Country:

Primary language spoken at home :

Speaks and understands english:
O yes O no

Participant has been diagnosed with Down syndrome:
O yes O no

Group:
Reserved for United Dance

T-shirt size
O XS O S O M O L O XL

PARENT/LEGAL GUARDIAN INFORMATION

Parent/Guardian #1	Parent/Guardian #2
O Mr. O Ms. O Mrs. First name:	O Mr. O Ms. O Mrs. First name:
Last Name:	Last Name:
Birthdate: / /	Birthdate: / /
Street address:	Street address:
State: Zip:	State: Zip:
Country:	Country:
Home Phone:	Home Phone:
Work Phone:	Work Phone:
Cell Phone:	Cell Phone:
Email:	Email:

ADDITIONAL INFORMATION OF THE PARTICIPANT

Allergies or medical needs (if applicable):

How does her/she communicate (receptive and expressive)?

Does he/she have any specific physical needs that may impact dance such as surgeries, injuries, orthopedics, mobility devices, etc.?

Does he/she have any specific sensory sensitivities or sensory seeking behaviors? (Light, sound, smell, is he/she tactile or sensory defensive?, Any triggers?)

Does he/she have any specific behavioral needs or behavioral supports? What things have worked or not worked well in the past?

What are his/her favorite things? His/her interests, motivators and/or preferences?

What do you hope he/she will gain from participating in the program?

Has he/she taken part in previous dance, music or art classes?

How did you discover United Dance?

INFORMATION AND UNITED DANCE POLICY AGREEMENT

Payment: $120.
Name on card used for payment: _____
Once we receive your application form you will receive an invoice through email which you can directly pay online. We can also process your payment per phone at +1 857 272 3444. Without full payment, your registration is not valid. If you need help making your payment, please contact the United Dance team per email at **uniteddance@mail.com** or per phone at +1 857 272 3444.

Clothing: Participants wear dark sweatpants (black or dark blue) or a dance leotard with skirt and tights, socks (washed without fabric softener) or ballet shoes and the United Dance T-shirt (which you will receive on the first day of the course). Please arrive dressed in your dance clothing as dressing room space might be limited.

Lunch: Please provide a packed lunch and beverage for the participant. United Dance does not provide lunch and beverages.

Changes: The United Dance team decides on the distribution of the participants in groups. The final schedule will be communicated at least one month in advance. United Dance has the right to replace the teachers and team members in case of illness, pregnancy or force majeure. United Dance has the right to cancel the course in whole or in part. In the event of cancellation of the course, the full registration fee will be refunded. Other expenses are not reimbursed.

Reimbursement of the registration fee: The registration fee will not be refunded on termination of the participant for whatever reason. A full or partial reimbursement is only possible when submitting a medical doctor's certificate.

Photo consent: I/We hereby irrevocably consent to and authorize the use and reproduction by United Dance of any and all photographs, recordings, art work made by the participant, videotapes and/or other reproductions of likenesses of the participant's person or characteristics ("images") for any purpose, whatsoever, without compensation to the participant. All images shall constitute the property of United Dance, solely and completely. Further, I/We assign and release all rights to said images and art work made by the participant and authorize United Dance, or others authorized by them, to exhibit, broadcast, and/or distribute or otherwise further reproduce said images in whole or in part over or in any medium whatsoever, including, without implied limitation, newsletters, radio, newspapers, closed circuit television, film, cable and television, with or without compensation in perpetuity. I/We also release, discharge and agree to hold harmless the producers or any persons, or entities acting under their permission or authority from any liability arising from the use of said images.

Medical consent and liability waiver: I understand that as parent or guardian I will be contacted if medical attention is required during class time. If I cannot be reached, I hereby authorize an administrator of United Dance to arrange for treatment as necessary. I shall indemnify, hold harmless and defend United Dance, its officers, boards, agents, servants and employees, except in cases of willful misconduct and gross negligence on their part against any and all claims, actions, or suits brought for damages or alleged damages, and from all liability, loss and expense, including reasonable legal expenses, resulting from any injury to person or property or from loss of life sustained by my child while my child is a student at United Dance or while he/she is fulfilling a role in any United Dance production or event in which he/she has been invited to participate on or about United Dance premises, the United Dance course locations, or any other venue where such activity is taking place. I agree I will not hold United Dance or any of its agents (any faculty member or employee of United Dance or of its course location) liable for any article lost or stolen while my child is at United Dance. I understand that by signing these forms I am agreeing to accept the guidelines of United Dance.

Voluntary information sharing: A participant will not be penalized or excluded if their clinical information (IEP) is not shared with the United Dance staff. United Dance respects parents' choice in the matter. I understand that I am not required to submit any of my child's medical documents. If I do so, I understand and agree that this information has been volunteered by myself as a parent of a United Dance participant.

Safety: I/We understand that as a safety precaution, a parent or guardian must remain on United Dance premises or within 5 minutes walking distance during the United Dance class time. I/we understand that the safety of students, families, and staff is a crucial part of the United Dance courses. United Dance staff is not able to intervene with behaviors that are self-injurious or dangerous to others. If a participant demonstrates injurious behaviors during classes (that cannot be effectively redirected) alternative waiting to enroll in United Dance classes may be recommended.

Your signature below indicates that you have read and agree to abide by the policies and procedures listed on the registration forms and that all information given is correct and truthful:

Signature Name

/ /

Date