

Intermediate Line Dance Workshop Registration Form  
Saturday, March 27, 2010 10:00 am – 5:00 pm @ The Country Barn, Lancaster, PA  
Workshop & Dance - \$25.00    Workshop - \$20.00    Dance - \$5.00

Participant's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Parent/Guardian's Name (for under 18): \_\_\_\_\_

Day Phone #: \_\_\_\_\_ Evening Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Emergency Contact Phone #: \_\_\_\_\_

**When registering for more than (1) event/class/trip, you must write out separate checks for each.**

Program Title: Intermediate Line Dance Workshop

Check One: \_\_\_\_\_ How did you learn of the program (please check)

- |  |   |
|--|---|
| <input type="checkbox"/> Beginner Dancer (less than 1 year)      | <input type="checkbox"/> Newspaper  |
| <input type="checkbox"/> Intermediate Dancer (less than 3 years) | <input type="checkbox"/> The Country Barn   |
| <input type="checkbox"/> Advanced Dancer (over 3 years)          | <input type="checkbox"/> E-mail   |
|  | <input type="checkbox"/> Website ( <a href="http://www.dare2dance.net">www.dare2dance.net</a> ) |

**Cost:** \_\_\_\_\_ Please make checks payable to Dare 2 Dance Productions

Registration can be mailed to:

Dare 2 Dance Productions, 114 Thomas Street, Harrisburg, PA 17112  
Phone #: (717) 319-5514

**Participant's Waiver & Release**

Hold Harmless Agreement: The UNDERSIGNED PARTICIPANT and/or his/her guardian, in consideration of Dare 2 Dance Productions, through The Country Barn, providing facilities, instruction, and supervision in the activity for which he/she has registered does hereby:

1. Request permission to participate in the activity with full knowledge that said activity could result damage or injury to me.
2. I/we state that there are no health-related reasons or problems which preclude or restrict me from participating in said activity.
3. Assume all risks and responsibilities of possible damage or injury through participation in said activity. I understand I am to furnish my own insurance in case of injury.
4. In the event I/we need medical care, the parent/guardian is asked to sign the consent form below. In case of a serious medical condition, Dare 2 Dance will make every effort to notify the parent/guardian, but the first priority is providing care to the participant.
5. Agree to indemnify and hold harmless Dare 2 Dance Productions and the Country Barn against liability for personal injury or property damage resulting from my participation in said activity.
6. I acknowledge that programs held through the Country Barn may be filled or may be cancelled due to lack of participation or inclement weather.
7. Agree that once the program deadline date has past, there will be NO refunds. If cancelled prior to the deadline, you will receive a refund, minus a \$10 administration fee.
8. If a check is written and returned for insufficient funds, a \$25 service fee will be charged.
9. I agree to allow Dare 2 Dance Productions to use any photos taken at the activity for future Dare 2 Dance Productions publications.

**Parents (or Legal Guardian's Signature):** \_\_\_\_\_ **Date:** \_\_\_\_\_

For Office Use Only: Date Received: \_\_\_/\_\_\_/\_\_\_ Received By: \_\_\_\_\_  
Fee: \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Cash Receipt: \_\_\_\_\_ Walk-In \_\_\_\_\_ Mail \_\_\_\_\_