



School of Robinson Ballet
107 Union Street, Bangor, Maine
Phone: 990-3140

School of Robinson Ballet Registration/Liability Waiver

Student: _____

Date of Birth: _____

Parent/Guardian: _____

Mailing Address: _____

City: _____

Zip Code: _____

Phone: _____

Mobile: _____

E-mail: _____

Class Enrollment(s): _____

By signing below I hereby waive any claims against The Robinson Ballet/School of Robinson Ballet and any instructors for any personal injuries or loss or damage of personal property. I understand that since this is a physical activity injuries may occur. I assume the risk of any activities and may decline to participate in any activities, which may be harmful. It is my responsibility to inform the instructor of any physical limitations, which may prevent the student from fully participating in class.

If the student is sick we ask that they please stay home and not come to the day's class. While masks are not required here, we respect all those that choose to wear one during class. If the student is diagnosed with COVID, we ask that you please follow current CDC guidelines.

I hereby grant permission to Robinson Ballet Company to take and use photographs and video of the student to be used in print materials, publications, newsletters, news releases, DVDs, online, on Robinson Ballet Company website, social media, and in all other communications related to Robinson Ballet Company.

Initial: _____

Parent Signature: _____

Parent/Guardian (please print):

Date: