UNIVERSITY OF HARTFORD

THE HARTT SCHOOL COMMUNITY DIVISION

Dance Department Placement Class Form

Student Name:	
Date of Birth:	
Age:	
Address:	
Phone Number:	
Email Address:	
Parent/Guardian Name	

Current Training (Check all that apply & indicate hours per week as applicable):

□ I have no previous training

□ Ballet: _____ hours per week

□ Pointe: _____ hours per week

 \Box Other dance genres:

_____:____hours per week

_____hours per week

______hours per week

Current Dance School:

RELEASE

It is understood that there is a risk of physical injury inherent in dance training. The undersigned is willing to assume those risks and release, hold harmless, and indemnify the Hartt Community Division, its related entities, agents, employees, officers and representatives from and against any and all claims, demands, actions, judgments which the undersigned, or any person ever had, or may have against the Hartt Community Division, for any losses, costs and expenses (including attorney's fees) and damages or injuries known or unknown, real or personal, sustained by me or my child while in attendance and/or participating in all Hartt Community Division programs.

The undersigned also agrees that he or she will not hold the Hartt Community Division responsible for the loss damage of personal property while in attendance and/or participating in any of these programs.

PHYSICAL CONTACT:

Dance is an art form that requires teachers to be able to have appropriate physical contact for the purpose of making technical corrections. Consent is granted for such physical contact.

PHOTO/VIDEO CONSENT

Consent is granted for the student to be photographed or videotaped. These may be used by The Hartt Community Division without compensation in a public presentation.

PROTOCOLS & PROCEDURES:

The signature below indicates agreement to abide by the rules and policies of the Hartt Community Division. This includes, but is not limited to, behavior that exhibits respect toward fellow students, staff, instructors, the University of Hartford community, and our facility.

Student's Name (please print)

Parent/Guardian Name

Signature of Student, or Parent/Guardian if student is under age 18

Date

Date