

Spring 2024 Registration Form and Fitness Agreement

Print Name (Student) _____ Age: _____

Parent Name _____ Date: _____

Please Select One: In-person
 Online Only

Class(es) Desired _____

Address _____ Apt. _____

City _____ State _____ Zip code _____

Home Phone _____ Business _____

Cell _____ E-mail _____

Warranty of Fitness and Agreement to Limitation of Liability

I hereby certify that I am physically capable of participating in this exercise program designed by Michele Compa Dance and Exercise Center. I have no physical disability, impairment, or ailment that would prevent me from engaging in such active or passive dance exercise programs; nor do I have any physical conditions which should detrimentally aggravate.

Furthermore, I agree that I shall participate in classes and use the facilities entirely at my own risk and agree not to hold Michele Compa or any of her employees liable for any injury or damage which may occur to me in the above said class.

I also understand that classes paid for must be taken within the session period. Class monies may not be credited toward future sessions. There are no refunds without an authorized medical excuse.

Student Name: _____ Date: _____

Parent Name (if under 18): _____

Parent/Student Signature: _____

Spring 2024 Warranty of Fitness and Agreement to Limitations of Liability For Online Dance and Exercise Classes

I hereby certify that I and/or my child/children are physically capable of participating in this exercise program designed by Michele Compa Dance and Exercise Center. I/my child/my children have no physical disability, impairment or ailment that would prevent me from engaging in such active or passive dance exercise programs; nor do I/my child/my children have any physical conditions which should detrimentally aggravate.

Before participating in any online dance or fitness classes you should follow this instructions for online classes:

- Make sure you or your child wear athletic sneakers or appropriate dance footwear and clothing appropriate for dance and fitness movements
- Make sure you have enough room to move safely and comfortably
- Make sure your space is clear of all obstacles which could cause a slip, fall or any other injury

Furthermore, I agree that I/my child/my children shall participate in classes online entirely at my own risk and agree not to hold Michele Compa or any of her employees liable for any injury or damage which may occur to me in the above said class.

Child/Student's Name: _____

Sibling(s) Name (if applies): _____

Parent Name (Printed): _____ Date: _____

Parent Signature: _____