



Yuma Ballet Academy

3942 S Ave 4 1/2 E, Yuma AZ 85365
928.314.4732

Teen/Adult Student Registration and Waiver Form

Name _____

Contact telephone (Daytime) _____ (Evening) _____

Email _____

Address _____

City _____ State _____ Zip _____

I, _____,
Print name

hereby consent to the participation for the student in Ballet Yuma/Yuma Ballet Academy programs.

I am aware that all forms of dance and the rigorous exercises associated with it place unusual stresses on the body and carry with them the possible risk of physical injury. I assume this risk and agree that the Ballet Yuma/Yuma Ballet Academy programs, its staff, and the Ballet Yuma/Yuma Ballet Academy facilities shall not be liable in any way for injuries sustained during attendance in this program.

Signature _____ Date _____
(Parent signature if under 18 years of age)

For Office use only:

Session 1 Date:

Payment: \$ check cash

Session 2 Date:

Payment: \$ check cash

Session 3 Date:

Payment: \$ check cash