## **Dance Workshop Registration**

## **Participant Information**

Full Name
Email
Phone Number
Age
Emergency Contact Name
Emergency Contact Name
Emergency Contact Phone
Workshop Selection
Choose Workshop
Dance Experience/Level
Liability Waiver
I acknowledge that participation in the dance workshop involves physical activity and a certain degree of risk. By signing below, I release the workshop organizers, instructors, and venue from any liability in case of injury or loss incurred during participation.
I have read and agree to the terms of the liability waiver.
Participant Signature
Date