

# COLLIERVILLE ARTS ACADEMY

188 eastley st • collierville, tn 38017 • 901-861-7001 • www.colliervillearts.com

## -- ACTIVITY SIGN-UP --

(Please fill out FULLY or we may not be able to allow the undersigned to participate)

ACTIVITY: \_\_\_\_\_ Day(s)/Time(s): \_\_\_\_\_

Participant's Name \_\_\_\_\_ Gender \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Tel \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Any medical, learning or other considerations we should be aware of? Please indicate:

\_\_\_\_\_

*Courses and products offered by Collierville Arts Academy (CAA) may include activities and gear for martial arts, weight training, dance, fine arts, boxing, fitness, fencing and demonstration. Participation in some of these activities could be considered a high-risk sports activity. Please initial your understanding of the facts and your agreement to the policies below.*

### **INITIALS**

\_\_\_ I accept that my participation in any of these activities is at my own risk and I agree to consult with my personal physician, if I feel it necessary, before participating in any of these high-risk activities.

\_\_\_ I understand that CAA reserves the right to terminate enrollment or participation without refund for not abiding by the policies.

\_\_\_ I agree that I will not hold CAA, its staff members or employees liable for any injuries sustained or illnesses contracted by myself or family members while a participant of CAA or its programs.

\_\_\_ I agree to allow CAA to provide first aid or to place a call for emergency medical help in the event of an emergency.

\_\_\_ I also give permission for Collierville Arts Academy to take photos of participant and/or parents enrolled in our activities with this form to use for purposes of promotion of the Collierville Arts Academy.

*I have read and accept the policies of Collierville Arts Academy above by initialing and signing below.*

Only parents, legal guardians, and students 18 or over may sign below:

SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

-----