

Line Dancing Registration Form & Program Waiver

Name: _____ DOB: _____

Address: _____

Email: _____ Phone #: _____

Emergency Contact: _____ Phone #: _____

I accept complete responsibility for my health and wellbeing in this voluntary program. I understand that NO responsibility is assumed by the leaders of the program or the sponsoring agency.

I agree to defend, indemnify, and hold harmless the Township of Chartiers, its elective officials, officers, appointees, and employees from and against any and all loss, liability, and damages, of whatever nature to persons property, including but not limited to death of any person and of the loss of the use of any property related to or resulting from use of said facility pursuant to this agreement, except for the intentional misconduct of the Township of Chartiers or their elective officials, officers, appointees or employees.

Participant Signature _____ Date _____

Total fee for 6 classes 8/16/17-10/4/17 -\$30

No class will be held August 23rd or September 20th

Due 8/16/17

Date paid: _____ Check # or cash _____

Checks should be made payable to Chartiers Township.

Refund Policy: Full refund given within 24 hours of first class on 8/16/17, if you decide not to dance.

Forms and checks can be mailed or brought in person to:

Chartiers Township Community Center
2013 Community Center Drive
Houston, PA 15342