

RCVd	DB	Conf

Recreational Taiko Class Registration Form

Complete and bring this form to class. Please make check payable to Odaiko New England. This form must be signed by the student or the parent/guardi	an of minor.
Student's Name:	☐ New Student ☐ Returning Student
Check the appropriate session:	
□ Session 1 - Winter Date: □ Session 2 - Spring Date: □ Session 3 - Summer Date: □ Session 4 - Fall Date:	
Parent's Name(s) (if under 18):	DOB (minors):
Address: City:	State: Zip:
Email: Home Phone:	Cell Phone:
Emergency Contact:	Phone:
Allergies or other pertinent medical information:	
Tuition Amount: Amount Paid: □ Cash	Check # Balance:
CANCELLATION & REFUND POLICY: If you must cancel your registration after payment is made, full refund we prior to the first class date. If cancellations are made the day of the first of the be refunded. No requests for refunds will be accepted for no-shows or at REFUNDS, and NO MAKE-UP classes for closings due to hazardous we	class date, the total amount of the registration fee minus \$40 will ter the first day of class. Please note that there are NO
officers, agents, supervisors, instructors, employees, successors and assign connection with my taiko training program or the use of the facilities or Theater, which may result in injury, death or other damage to myself. In program and the use of the facilities, I hereby release Odaiko New Englas supervisors, instructors, employees, successors and assigns from any and connection with injuries, death or damage to myself, which I, my heirs, whave or hereafter may have. Furthermore, I do personally assume all risk damage which may befall me or my personal property whether foreseen corporation and persons from any claims, including but not limited to an corporation, agents, officers, supervisors, instructors, employees, success child are physically fit to practice and engage in the physical program come/my child for not participating in these activities. I agree that photogram Odaiko New England. This agreement shall remain in effect until I have have also given 30 days written notification of intent of being released fit permission to contact me in the future at the above mailing address, photor videographed by Odaiko New England or its contractors either individual be used to identify me as a subject in any photographs or video of me.	equipment of Odaiko New England/Regent Underground consideration for being permitted to engage in the taiko training and/Regent Underground Theater its owners, officers, agents, all causes of action, debts, controversies, and claims in executors, administrators, successors and assigns ever had, now is in connection with the aforesaid use, for any harm, injury, or unforeseen, and further save and hold harmless the said y claims or liabilities arising out of negligence of the aforesaid sors and assigns, by me, my family, estate, heirs or assigns. I/my innected with taiko training and there is no reason known to aphs of me/my child may be used for promotional purposes by actively ceased any activity with Odaiko New England and from this waiver. I agree that Odaiko New England has ne number and e-mail address. I am willing to be photographed dually, or as part of a group. I further agree that my name may
Signature (student):	
Signature (parent/guardian of minor):	Date: