



2019 TWU PIONEER PRIDE PREP CLASSES

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

E-Mail: _____ Phone: _____

High School Graduation Year: _____

Current School Attending and Classification/Grade Level: _____

Prep Class(es) Attending (circle): February 23 | March 2

Are you currently on a dance team? (circle) Yes | No If so, where? _____

Dance Experience: _____

I plan to try-out for Pioneer Pride in April (circle) Yes | No | Maybe

Number of Classes Attending: _____ x \$25 = _____

****You MUST complete the attached waiver in order to be allowed to participate in the classes.**

**Cash or check accepted. Checks should be made payable to TWU Fitness & Recreation & must include DOB & DL#. Students can drop off application, wavier, and class fee to the TWU Fitness Center, or mail items to TWU Fitness & Recreation, Attn: Allison Fields, P.O. Box 425705, Denton, TX 76204*

Registration begins 30 minutes prior to class time. Pre-registration is not required, but it will reserve your spot in the class. All classes are held at the TWU Denton Pioneer Hall (1600 Bell Ave.) from 9:00am-12:00pm. Attire is form fitted solid color tank or half top and form fitted black bottoms. Bring jazz shoes, tennis shoes, and a bottle of water.



TWU PIONEER PRIDE PREP CLASSES LIABILITY WAIVER

I request to be allowed to participate in the Texas Woman's University Pioneer Pride Dance team prep classes. I recognize that there exists the possibility of injury, including permanent disabilities and death, which might result not only from my actions, inactions or negligence, but the actions, inactions, or negligence of others, or the condition of the premises or facility used. I knowingly and freely assume all the foregoing risk and accept personal responsibility for the damage following such injury, disability or death related to participation in the prep classes.

I understand the activities available at the TWU Fitness and Recreation program may involve strenuous physical activity and that a medical check-up is advisable before participation in any TWU Fitness and Recreation programming.

In consideration of TWU assistance in providing equipment, personnel, and/or facilities, located on the TWU campus, I hereby fully hold harmless, release and discharge TWU, its regents, officers, agents, employees, and representatives from all rights, claims, demands, damages, liabilities, and actions whatsoever that I or my representatives have or may have against TWU regents, officers, agents, employees, and/or representatives arising from my voluntary participation in the TWU dance team prep classes.

Please be aware that by participating in TWU events you are automatically authorizing TWU and its employees, agents, and personnel who are acting on behalf of TWU to use your name, photograph, video image, or other likeness for purposes related to the educational mission of TWU, including but not limited to publicity, marketing, websites, social media, other electronic forms or media, and promotion of TWU and its various programs.

Accordingly, you agree that TWU shall not be held responsible for the final use of the image by any outside media or user or by other third parties, and you release and hold harmless TWU, its employees, agents and personnel acting on its behalf from any and all liability for damages of whatever kind of nature which may at any time result from this release and authorization or from the dissemination of your name, photograph, video image or likeness.

I have read this release and fully understand the consequences for executing this waiver and release. This release is fully and voluntarily executed by me.

I, _____ fully understand and agree to the above terms.

Dancer's Signature: _____ Date: _____

Date of Birth: _____ Age: _____

TO BE READ AND SIGNED BY A PARENT OR LEGAL GUARDIAN OF A MINOR (under 18 years of age)

I hereby state that I am the parent or guardian of the minor whose signature appears above.

I am familiar with and consent to the terms and provisions set forth in this waiver.

Parent or legal guardian's printed name: _____

Parent or legal guardian's signature: _____