

## Jalene's Belly Dance Class Registration Form

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

### Sign me up for:

- 5-week Mixed-Level Session Only, Tuesdays, September 28 to October 26, 7:30-8:30pm
- REGISTER BEFORE SEP. 7: Mixed Level Class Only \$50
  - REGISTER AFTER SEP. 7: Mixed Level Class Only \$60
- 5-week Mixed-Level Session + Int/Adv Add-On, Tuesdays, September 28 to October 26, 7:30-9:00pm
- REGISTER BEFORE SEP. 7: Mixed Level Class + Int/Adv Add-On \$75
  - REGISTER AFTER SEP. 7: Mixed Level Class + Int/Adv Add-On \$90

Total amount for classes: \$ \_\_\_\_\_

Payment type:  Check Enclosed  Money Order Enclosed  Prepaid via Paypal

**Cancellation Policy:** Sorry, but there are no refunds for missed classes. With the session rate, you are receiving a discount for your pledge to be in class. This in turn enables me to commit time and expense to hold the class. I do allow drop-ins if there is enough space, see [jalenedance.com](http://jalenedance.com) for drop-in rates.

**Waiver:** I (Print Name) \_\_\_\_\_ am of able body and sound mind, and understand that belly dancing is a strenuous physical activity. I take full responsibility for my own health and welfare as a participant in this class. I assume all risks and hazards incidental to my participation in this class, and do hereby waive, release, absolve, indemnify and hold harmless Jalene Hernández and Ballard Health Center for any claim arising out of any injury to myself (or others) or personal loss.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Thank you for your advance registration. I look forward to our time in class together!

Send registration and payments to:

Jalene Hernández • 2126 A Dexter Ave. N. • Seattle, WA 98109