

STUDENT FORM
(ALTON DANCE LTD, trading as The Joneses' Studio)



STUDENT NAME:

PARENT/GUARDIAN NAME:

TELEPHONE:

EMAIL:

EMERGENCY CONTACT NAME:

EMERGENCY CONTACT NUMBER:

ADDRESS:

PRE-EXISTING INJURIES OR MEDICAL CONDITIONS THAT WE NEED TO BE MADE AWARE OF:

I have made myself aware and will continue to make myself aware of all procedures I must adhere to in the studio.

Signed _____

Date: _____

Photography Waiver: Photos and videos may be taken for promotional purposes including posting of photos on The Joneses' Studio website and media pages. If you consent to your photos/videos or children's photos/videos being used please sign below.

Signed _____

Date: _____

GDPR Policy: The Joneses' Studio would like to keep you up to date with the latest news and information about what we are up to. If you would like us to do this please sign below. Any personal information you provide will be processed in accordance with The Joneses' Studio Privacy Policy.

Signed _____

Date _____

The Joneses' Studio accepts no responsibility for any injuries you might incur on the studio premises.

STUDENT FORM CONTINUED
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Coronavirus/COVID-19 Waiver:

Please tick each box.

- I acknowledge the nature of the COVID-19 virus and that the government and many other public health authorities are continuously updating the recommended guidelines to adhere to. Furthermore, I am following all recommended government guidelines as much as possible.
- I acknowledge that I must comply with all set procedures to reduce the spread of the COVID-19 virus while attending the dance studio.
- I affirm that every time I enter the dance studio I am not experiencing any symptom of illness such as a cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- I affirm every time I attend the dance studio I have to the best of my knowledge not been exposed to someone with a suspected and/or confirmed case of the COVID-19 virus.
- I will not attend or book in if I have been diagnosed with the COVID-19 virus or not yet cleared as non contagious by public health authorities.
- I will disclose if I have had any international travel.
- I acknowledge that Alton Dance Ltd has put in place correct preventative measures to reduce the spread of the COVID-19 virus. I further acknowledge that Alton Dance Ltd can not be held liable for any exposure to the COVID-19 virus caused by misinformation, negligence or the health history provided by each student, parent/guardian of students and staff.

Print Name and Children's names:

Signed:

Date: