

ORIGINATION

CULTURAL ARTS CENTER

1 - WEEK SPRING DANCE INTENSIVE

3 Dance classes per day
(contemporary hip hop, African)
Boot Camp & Body Conditioning

Girls & Boys ages 8-16
9AM - 3PM
MONDAY - FRIDAY
APRIL 20 - 24

TUITION* \$175

REGISTRATION DEADLINE

APRIL 15, 2020

*TUITION IS NONREFUNDABLE and NONTRANSFERABLE

FOR MORE INFORMATION

VISIT: WWW.ORIGINATIONINC.ORG

OR EMAIL: INFO@ORIGINATIONINC.ORG



ORIGINATION CULTURAL ARTS CENTER
3708 WASHINGTON STREET
JAMAICA PLAIN, MA 02130
WWW.ORIGINATIONINC.ORG



2020 Spring Dance Intensive Registration Form

Student Information

Name _____

Date of Birth: _____ Age: _____ Gender (circle one): Female/Male

Parent/Legal Guardian Information

Name: _____

Relationship to child: _____

Mailing Address: _____

City/State/Zip _____

Daytime Phone: _____ Home Phone: _____

Cell Phone: _____ E-mail: _____

Previous dance training? No ___ Yes ___ If yes, please provide name _____

Emergency Contact Information

Name: _____

Relationship to child: _____

Address: _____

City/State/Zip _____

Daytime Phone: _____ Home Phone: _____

Cell Phone: _____

Does the child have any pre-existing medical conditions or problems? ☐ Yes ☐ No

If you answered "yes" please explain:

Waiver of Liability/Acknowledgement of Program Guidelines & Non-Refund Policy

I understand that as a parent or guardian I will be contacted if medical attention is required during class time. If I cannot be reached, I hereby authorize an administrator/faculty member of OrigiNation, Inc., to arrange for treatment as necessary. Each student may decline to participate in any activity that may be deemed as harmful and is responsible for informing the instructor of any physical limitations, which may prevent full participation in class. I will not hold ShapeUp with Shaumba, Inc. OrigiNation, Inc., its affiliates, its faculty, administration, employees or representatives liable for any costs resulting from any injuries sustained or illnesses contracted or responsible for any article(s) lost or stolen while a student is participating in an OrigiNation, Inc. program, except in the case of proven negligence. **Additionally, I understand that the registration fees are NON-REFUNDABLE and NON-TRANSFERABLE. If my child is withdrawn from the program all monies paid will be forfeited.** I hereby acknowledge that I have read and agree to the terms and conditions of this Waiver of Liability.

Release Authorization

I hereby authorize OrigiNation, Inc. to utilize my child's photograph or video image in promotional materials for OrigiNation, Inc. through 12/31/2100. Promotional materials are defined as brochures, advertisements, the organization's official website and promotional videos.

Signature of Parent/Legal Guardian: _____ Date: _____

For Office Use Only: Yes _____ No _____ Date _____ Receipt # _____

Enrollment application: Yes _____ No _____ Okay to enroll? Yes _____ No _____ OCAC Initial _____