



P. O. Box 64311, Fort Worth, Texas 76164 817.920.9004

Instructor _____
Class _____

2008 FALL SEASON

STUDENT REGISTRATION FORM & STANDARD LIABILITY RELEASE

I do not hold Ballet Folklorico Azteca de Fort Worth, Inc. (BFA) responsible or liable in case of accident or injury to my child or myself during class practices, rehearsals, competitions, performances, exhibitions, or any/all activities. I understand that any costumes, and/or accessories issued to my child or me are the property of Ballet Folklorico Azteca de Fort Worth, Inc. While the items are in my possession, I understand that I will be responsible for the cleaning and upkeep of the items. I understand that it is also my responsibility to return the costumes per the instruction of the Board of Directors, a designee of the Board of Directors, or Artistic Director when requested and report any damages that may have been incurred during the time of use. I understand that the above information may be published in a BFA Directory. I understand my photo or my child's photo may be posted on the BFA Website and may be released for publications, news releases, promotions, or advertisements. I understand that by registering myself, or my child, as listed under "student name" below, said student will not participate in any private or public folklorico competitions, performances, or exhibitions for any entity other than BFA, exclusive of any properly sanctioned private or public education supported entity. Any participation in any such performances is strictly prohibited, and may result in said student's dismissal from BFA with no tuition, fee, or any other type of financial refund, as determined by a majority vote of the BFA Board of Directors.

I have read and understand this student registration form.

Parent/Student name (PRINT) _____

Parent/Student Signature _____

Date: _____

2008 Fall Season (approx. 15 weeks) August through November

Tuition Fee covers the entire Fall Season

\$100 per student

\$ 40 per additional student (from the same family)

PAYMENT MUST BE PAID IN FULL AT THE TIME OF REGISTRATION

Student Name:	Parent/Legal Guardian:
Address:	Home Telephone:
City/State/Zip:	Cell phone:
Date of Birth:	Work Telephone:
School:	Employer:
Grade:	<i>Correspondence is mainly done by email please provide an email address</i>
Restrictions as to whom this child may be released to?	
Does this child have any health problems?	

Please check below how you would like to volunteer with Ballet Folklorico Azteca de Fort Worth, Inc.

Facilities Fund Raising Fiestalorico Miscellaneous
 Costume Sewing/Upkeep Hair Piece Assembly Class parent Parade of Lights

For use by BFA only:

Registration received by: _____ Date: _____ Payment Type and Amount: _____

Name of 1st student in Family _____

Additional Family _____

Additional Family _____

Additional Family _____