



BALLET ACADEMY

ARTISTIC DIRECTOR KAREN HIRST KENNEDY

REGISTRATION FORM:

STUDENT NAME: \_\_\_\_\_

STUDENT AGE/DATE OF BIRTH: \_\_\_\_\_

PARENTS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBERS: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

LEVEL/NUMBER OF CLASSES PER WEEK: \_\_\_\_\_

MONTHLY/SEMESTER/YEARLY PAYMENT: \_\_\_\_\_

I AUTHORIZE BALLETB&BEYOND TO PHOTOGRAPH AND OR VIDEO MY CHILD TO BE USED FOR ADVERTIZING PURPOSES AND OR TO BE PUT ON THE INTERNET.

PARENT AUTHORIZATION SIGNATURE: \_\_\_\_\_

PLEASE LIST ANY ALERGIES OR HEALTH PROBLEMS YOUR CHILD MIGHT HAVE THAT WE SHOULD KNOW: \_\_\_\_\_



BALLET ACADEMY

**Required Student Uniform Leotard Order Form**  
**\$35 per leotard**

NAME: \_\_\_\_\_

LEVEL: \_\_\_\_\_

LEOTARD COLOR: \_\_\_\_\_

**OPTIONAL BLACK LEOTARD only for Pre-Professional \$50:** \_\_\_\_\_  
(Pre-Professional level may wear as uniform everyday)

SIZE CIRCLE ONE: S INT M L S-ADULT M-ADULT L-ADULT

QUANTITY: \_\_\_\_\_

AMOUNT PAYED: \_\_\_\_\_



BALLET ACADEMY

OFFERING PROFESSIONAL DANCE TRAINING

Artistic Director:  
Karen Hirst Kennedy

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY 2021-2022

\_\_\_\_\_, Parent of \_\_\_\_\_ (student), agrees that the student's use of Karen Hirst Kennedy / Ballet & Beyond facilities, equipment, services, or premises may involve risk of injury to persons, including those injuries described below. Student and Parent assume full responsibility. Parent and Student hereby release Karen Hirst Kennedy / Ballet & Beyond, its employees, and agents harmless from all liability for any loss or damage, for injury to Student, whether caused by the active or passive negligence of Karen Hirst Kennedy / Ballet & Beyond. Student agrees to indemnify Karen Hirst Kennedy / Ballet & Beyond for any loss, liability, damage it may incur due to the presence of the Student in, upon or about Karen Hirst Kennedy / Ballet & Beyond premises, facilities, services or equipment. Parent represents that (a) the Student is in good physical condition and has no disability, illness, or other condition that could prevent Student from exercising without injury or impairment of health, and (b) that Student has consulted a physician concerning an exercise program that will not risk injury to student or impairment of Student's health. The risk of injury may include injuries arising in participation by Student in supervised or unsupervised activities at the school; injuries and medical disorders arising from exercising at the premises such as sprains, broken bones, torn ligaments, torn muscles, heart attacks and strokes and accidental injuries occurring anywhere at the School. Parent agrees that the foregoing release, waiver and indemnity agreement is intended to be as broad as is permitted by laws of the State of Florida and that if any portion is held invalid, it is agreed that the balance shall continue in full force and effect.

Parent  
Signature \_\_\_\_\_ Date: \_\_\_\_\_

BALLET&BEYOND  
9048 SW 152<sup>nd</sup> St. Palmetto Bay FL 33157  
14190 SW 77<sup>th</sup> Ave Miami, Florida 33158  
Artistic Director : Karen Hirst Kennedy

# BALLET&BEYOND COVID-19 Liability Waiver

By signing this liability waiver, I (parent) \_\_\_\_\_ and (child) \_\_\_\_\_ fully acknowledge the infectious nature of COVID-19 and voluntarily accept the risk that I or my child may be exposed to or infected by COVID-19 by entering any Ballet&Beyond LLC Studio (located at 9048 SW 152<sup>nd</sup> St Palmetto Bay, FL 33157 and 14190 SW 77<sup>th</sup> Ave. Palmetto Bay FL 33158) and that exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to and/or infected by COVID-19 at Ballet&Beyond may result from active or passive negligence of myself or others, including, but not limited to, Ballet&Beyond employees, its successors or assigns, as well as, its officers, agents, other members and/or clients. I agree to assume all risk and accept sole responsibility for any injury to myself, illness, damage, loss, claim, liability, or expense, of any kind. I further promise not to sue Ballet&Beyond and agree to indemnify and hold harmless, its employees, and representatives from any and all damages resulting from me and/or my child entering Ballet&Beyond and whether a COVID-19 infection occurs before, during, or after visiting Ballet&Beyond.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

When outside or entering either studio:

Maintain at least 6 feet separation from other individuals not within the same household. If such distancing is not feasible, other measures such as face covering, hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

## HEALTH PROTOCOL

Self-screen before entering Ballet&Beyond for any of the following new or worsening signs or symptoms of possible COVID-19:

- Cough
- Shortness of breath or difficulty breathing
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- Loss of taste or smell
- Diarrhea
- Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
- Known close contact with a person who is lab confirmed to have COVID-19

All teachers will disinfect barres and any equipment before and after use.

Wash or disinfect hands upon entering Ballet&Beyond and after any interaction with other students or anything in the studio.

Any balls, yoga mats or bands brought by the student to Ballet&Beyond, should be disinfected before entering the studios and after use.

Consistent with the actions taken by many individuals across the state, consider wearing cloth face coverings (over the nose and mouth) and gloves that fully cover from the wrist to the fingers while in the studio or when within 6 feet of another person who is not a member of the individual's household.

Individuals aged 65 or older are at a higher risk of COVID-19. To the extent possible, avoid contact within 6 feet with individuals aged 65 and older.