

Friends of Ala Wai Ballroom Dance Academy  
Membership/Student Registration Form Year 2012

(Please print clearly)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_ Email \_\_\_\_\_

1st Quarter, January	
<b>Rumba</b> , Beginning	<input type="checkbox"/> \$5
<b>Tango</b> , Begin/Inter	<input type="checkbox"/> \$5
<b>Samba</b> , Inter/Advanced	<input type="checkbox"/> \$5
Annual Dues ends 12/2012	<input type="checkbox"/> \$5
Total Amount Due	_____
Notes	

2nd Quarter, April	
<b>Cha-Cha</b> Beginning	<input type="checkbox"/> \$5
<b>Q-Step</b> Begin/Inter	<input type="checkbox"/> \$5
<b>Rumba</b> Inter/Advanced	<input type="checkbox"/> \$5
Annual Dues ends 12/2012	<input type="checkbox"/> \$5
Total Amount Due	_____
Notes	

3rd Quarter, July	
<b>Jive</b> Beginning	<input type="checkbox"/> \$5
<b>Fox Trot</b> Begin/Inter	<input type="checkbox"/> \$5
<b>Cha-Cha</b> Inter/Advanced	<input type="checkbox"/> \$5
Annual Dues ends 12/2012	<input type="checkbox"/> \$5
Total Amount Due	_____
Notes	

4th Quarter, October	
<b>Samba</b> Beginning	<input type="checkbox"/> \$5
<b>Waltz</b> Begin/Inter	<input type="checkbox"/> \$5
<b>Jive</b> Inter/Advanced	<input type="checkbox"/> \$5
Annual Dues ends 12/2012	<input type="checkbox"/> \$5
Total Amount Due	_____
Notes	

For, and in consideration of the foregoing, I hereby assume the risk for any injuries and any loss of property that I may sustain while receiving such instructions and participating in such activities and while on the premises of the indicated governmental agency while receiving such instructions and participating in such activities and so hereby remise, release, and forever discharge and promise to hold harmless Friends of Ala Wai Ballroom Dance Academy, the indicated governmental agency, and their respective officers, employees, and agents from any action, suits, damages, claims or judgments that may result from any personal injury (physical or emotional) or loss of property that I may sustain while receiving such instructions or participating in such activities in facilities, buildings, parking areas, and rooms described above.

This release is binding on me and on my heirs and personal representative and is valid for all instructions that I receive and described activities I participate in during the membership year indicated above.

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

- NO REFUNDS, NON TRANSFERABLE -