

Bellydance Classes with Aslahan

Registration and Waiver of Liability

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email: _____

Do you have previous experience with Middle Eastern dance? Yes No

How did you find out about this class?

Check to join my e-mailing list

Waiver of Liability

I understand that there are risks associated with any physical activity and that it is my responsibility to assume those risks, and to consult with my physician if I have concerns.

I agree to release and hold harmless the dancer/instructor know as Aslahan from liability for any injury, damage or loss which occurs before, during, or after classes.

Signature: _____ Date: _____

Parent/Guardian Signature (if under 18):
