

method+intensive

method contemporary dance

ENROLLMENT APPLICATION

Please print this application, fill it out, and mail it with your deposit to the address below.
You will receive an email confirmation informing you that your position in *method+intensive* has been secured.

Name _____ Age _____

Mailing Address _____

Email Address _____ Phone _____

College/Major _____

Level Professional Advanced Intermediate Beginner

Please Describe your dance background, training and experience

Please indicate the program you've selected: full intensive | \$375 technique class only | \$150

Deposit Due: June 15, 2010 | \$50 non-refundable deposit via check or money order only, made payable to
bradley michaud, is required with the return of your application **Remaining Balance Due: July 15, 2010**
mail to **method, 944 North Hayworth Ave., #3, West Hollywood, CA 90046**

RELEASE, WAIVER OF LIABILITY AND EXPRESS ASSUMPTION OF RISK AGREEMENT (MUST BE COMPLETED AND SIGNED)

In consideration of my participation in any of bradley michaud and method contemporary dance's activities, I acknowledge that I understand the nature of the activity and that I am qualified, in good health, and in proper physical condition to participate in such activity. I acknowledge that if conditions are unsafe, I will immediately discontinue participation in any activity.

I fully understand that dance and other movement activities related to bradley michaud and method contemporary dance may involve risks of serious bodily injury, including permanent disability, paralysis, and death, and that these and other risks may be caused by my own actions, or inactions, those of others participating in the activities, the conditions in which the activities takes place, or the negligence of the Releasees named below; and that there may be other risks either not known to me or not foreseen at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the activity. In the case of serious injury to myself in which a parent or guardian cannot be contacted immediately, I hereby authorize method contemporary dance staff, volunteers, and other participants to apply any necessary medical care and to contact emergency medical support as soon as possible.

I hereby release, discharge, and covenant to not bring legal action against BPStudios, Brockus Project Dance, Bradley Michaud, Deborah Brockus, and method contemporary dance, it's patrons, Board of Directors, their respective administrators, directors, agents, officers, volunteers, and employees, (each considered one of the Releasees herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Releasees. This release waiver of liability and express assumption of risk agreement does not apply to any liability, claims, demands, losses, or damages arising out of the gross negligence of, or intentional, willful or wanton misconduct of Releasees. If I make a claim which does not arise from the gross negligence of, or intentional, willful or wanton misconduct of Releasees against any of the Releasees, I will indemnify, defend, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost which may incur as the result of such claim.

Emergency Contact Name and Phone Number: _____

Please list any medical conditions that may affect your safety or the safety of those around you (e.g. allergies, asthma, seizures, heart ailments, physical handicap, etc.). _____

I acknowledge that I have read this release, waiver of liability and express assumption of risk agreement and fully understand all of its provisions.

Signature _____ Date _____ Printed Name _____

**If you have any questions regarding *method+intensive* please feel free to contact:
bradley michaud, artistic director
info@methoddance.com or 310.435.2901**