



# SARATOGA

California

City of Saratoga  
13777 Fruitvale Avenue  
Saratoga, CA 95070  
[www.saratoga.ca.us](http://www.saratoga.ca.us)  
408.868.1208

## Dance Registration Form

### Participant Information

Full Name: \_\_\_\_\_

Date of Birth (MM/DD/YY): \_\_\_\_\_ Access ID Number (if applicable): \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Special Considerations (i.e., food allergies, diabetes, seizures, non-verbal): \_\_\_\_\_

### Emergency Contact Information

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

*Dance registration waiver must be completed prior to entering the dance.*

*Only exact cash or checks accepted for in-person registration. Please make checks payable to "The City of Saratoga." Credit card payment available for online registration, prior to event date. No refunds will be given.*

### Release of Liability, Permission to Treat, and Photo Authorization

By my signature below, I agree to release and hold harmless the City of Saratoga and its officers, employees, and volunteers from any claim, demand, or cause of action for injury to the participant(s) named below or damage to his/her personal property which arises out of or is in any way connected with the City of Saratoga programs and any travel associated with such programs. I understand participation in physical activities may be dangerous. The City of Saratoga will not be responsible in case of accident, injury, illness, or property damage. I hereby give my consent to the City of Saratoga and/or the host organization to provide customary medical attention, treatment, transportation, and emergency medical services as warranted in the course of my/my child's participation. In the event of such an emergency, the City will not be obligated to delay any portion of the trip or activity which may require you to find alternative transportation from the trip/activity. I agree that the City of Saratoga may take, use, reuse, publish, and republish photographs of or including the participant(s) named below for advertising and any other purpose in any manner and medium and without restriction on alternations or composition.

If signing on behalf of one or more minors, I hereby warrant that I am a legally competent adult and a parent or legally appointed guardian of the minor(s), and that I have every right to contract for the minor(s) in the above regard.

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

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