

Professional Learning Workshop Registration

Please complete the registration form and mail it to:

Luna Dance Institute
605 Addison Street
Berkeley, CA 94710-1972

For questions on workshops or registration contact Jochelle Pereña jperena@lunadanceinstitute.org

Participant Information:

Name: _____ Professional Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Mobile Phone: _____ Email (required): _____

How did you hear about us?

- Luna website Friend Flyer/postcard sent to you Email sent to you
 Community Calendar _____ Display ad _____ Other _____

Workshop Information:

Workshop _____ Date _____ Fee _____

Fees: Workshop fees differ. Please see the workshop schedule at lunadanceinstitute.org for workshop fees.

Discounts: 15% for NDEO/CDEA/Dancers' Group members; 10% discount if registering for multiple workshops (must pay in full for all workshops to receive discount); 50% discount for full-time enrolled students (no other discounts apply, student ID required)

Total Fee \$ _____

Applicable Discounts** \$ _____ Check here if workshop is subsidized by First Five Alameda Co.

Annual PL User Fee \$25.00 Check here if already paid annual user fee includes library & Practitioner Exchange privileges

Total Due: \$ _____

Indemnification, Waiver and Release

In consideration for my participation, in **Luna Dance Institute** (LDI) classes to be operated at various sites and facilities, I/we agree to:

1. Assume all risk of injury, to all risk of damage or loss of property arising out of my own participation in this program.
2. Release, discharge and waive any and all responsibility of Luna Dance Institute, its agents, partners, staff or representatives, from and against liability for any injury, including death, and for damage or loss to property which may be suffered by my child or arising out of, or in any way connected with, participation in this program.
3. Indemnify and hold harmless Luna Dance Institute its agents, partners, staff or representatives, against all liability, claims, demands, actions, loss and damage arising out of my participation in said program.

The undersigned hereby states that he/she is in good health and is able to participate fully in this movement program.

I/we hereby authorize that Luna Dance Institute, its agents, partners, staff or representatives may provide ice or bandages in emergency and to contact my physician should an emergency situation arise.

I have read the refund policy and agree to adhere to the guidelines listed herein as long as I am a participant at Luna Dance Institute.

Check all:

- I have met my pre-requisites for this workshop
 I am interested in continuing education units for these courses & will let registrar know
 I understand that there are NO refunds
 I grant permission to be photographed or videoed for promotional or educational purposes

Signature _____ Date _____