



Polynesian Party Planner Class Registration Form

Please Print and Fill Out Completely

Students Name: _____ Birthday: _____

Parent's Name (If Applicable): _____

Address: _____ City: _____ Zip: _____

Home#: _____ Cell#: _____

Email: _____

Would you like to receive e-mail reminders regarding classes, performing opportunities, and other special events? YES OR NO

Would you like to be added to our closed Facebook Page (events are posted, class videos, and pictures)? *You must have a Facebook account to participate.

FB Account Name: _____

Waiver For Participation:

In Consideration of your accepting my (child's) entry, I hereby, for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against Glenda Florez, Hālau Kalama Studios, Halau Kalama, and Polynesian Party Planners INC and its employees, representatives, and successors for any and all injuries suffered by myself or my child at this activity, performance, or event for which I am registering myself or my child. If I am hired by Polynesian Party Planners INC for a paid event I understand that I am an Independent Contractor and also waive all rights and claims for damages and injuries at events by Polynesian Party Planners INC and Halau Kalama.

Signature: _____ Date: _____

Photo and Video Consent: Polynesian Party Planners INC may occasionally photograph or video registering student during program or events. Photographs or videos will be for public view and may be displayed in program areas or used for company promotion or advertising. I understand that registered student may be participating in events or activities that could produce photos or videos without any financial compensation, and I understand that this releases Polynesian Party Planners INC from any future claims as well as liability arising from the use of said photograph or video. Please Initial _____