

**DANCER EMERGENCY TREATMENT FORM**

Dancer's Name Date of Birth \_\_\_\_\_

Allergies \_\_\_\_\_

**Mom's Information**

Name: \_\_\_\_\_ Place of Employment: \_\_\_\_\_

Home Addresses: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phones: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Permission to Text \_\_\_ Yes or \_\_\_ No Cell Carrier \_\_\_\_\_ Email: \_\_\_\_\_

**Dad's Information**

Name: \_\_\_\_\_ Place of Employment: \_\_\_\_\_

Home Addresses: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phones: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Permission to Text \_\_\_ Yes or \_\_\_ No Cell Carrier \_\_\_\_\_ Email: \_\_\_\_\_

**Other contact's Information**

Name: \_\_\_\_\_ Relationship to dancer \_\_\_\_\_

Home Addresses: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phones: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

**Health Insurance**

Company \_\_\_\_\_ Policy #: \_\_\_\_\_ Physician \_\_\_\_\_

Phone \_\_\_\_\_

If your child requires a visit to the hospital while under the supervision of Ballet Arts, Inc., a Ballet Arts Director can authorize treatment if you have consented by signing below.

By signing below, I hereby consent to allow:

\_\_\_\_\_ a Ballet Arts Director to authorize any needed medical treatment for this dancer in my absence.

\_\_\_\_\_ my child to dance with Ballet Arts of Jackson, Inc. and to allow my child's picture to appear in marketing/publicity materials published by Ballet Arts of Jackson, Inc. for the general public including the Ballet Arts' website and social media.

Furthermore, I hereby waive any claim against Ballet Arts of Jackson, Inc., its Board of Directors, agents, or the dancing school where company classes or rehearsals are given in the event of any injuries incurred during rehearsals, performances, company classes, or any other Ballet Arts of Jackson, Inc. activity.

Signed \_\_\_\_\_ Date \_\_\_\_\_ Relationship to Dancer \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_, Dancer if over 18