



REGISTRATION APPLICATION

DATE \_\_\_\_\_

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

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

City: \_\_\_\_\_ State \_\_\_\_\_ ZipCode \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Mailing/Emailing: Yes No

Alumni College: \_\_\_\_\_ Graduating Year: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ ER Phone: \_\_\_\_\_

Affiliation (Please Circle)

Alumni Alumni Family Alumni Friend RU Faculty/Staff Retired RU Faculty/Staff Student

For Alumni Family Only:

Alumni's Name \_\_\_\_\_
Relationship to Alumni (ex. Spouse, parent, child, friend) \_\_\_\_\_

For Alumni Friend Only:

Sponsored by Alumni's Name: \_\_\_\_\_ College/Year \_\_\_\_\_
Sponsorship Alumni Signature: \_\_\_\_\_

For Student Only:

College/School \_\_\_\_\_ Graduating Year \_\_\_\_\_

Informed Consent and Waiver Form

This is a statement in which you are informed of the established safe practices for participation in the Rutgers DanceSport Alumni Club program ("Club"). Please review and acknowledge the below by initialing each statement before each paragraph. After reviewing this form, please sign the acknowledgement and acceptance portion of this form. If you are a minor, a parent or a guardian must also sign this form.

I \_\_\_\_\_ (print name) voluntarily agree to assume all risks involved in participating in the club and/or traveling to and from participation sites.

\_\_\_\_\_ I understand that supervision by a Rutgers Staff, or Club Officer is not provided and is under no obligation to do so.

\_\_\_\_\_ I recognize that I may expose myself to injuries including but not limited to temporary or permanent muscle soreness, sprains, strains, cuts, bruises, abrasions, ligament and/or cartilage damage, head, neck, or spinal injuries, loss of use of arms and/or legs, eye damage, disfigurement or even death.

\_\_\_\_\_ I also recognize that there are foreseeable and unforeseeable risks of injury or death that may occur as a result of my participation in the above named club and that cannot be specifically listed. It is expressly understood by the undersigned that he/she is solely responsible for any costs arising out of bodily or property damage sustained through participation in club activities.

\_\_\_\_\_ I understand that it is strongly encouraged that I consult with a physician before participating in any club dance activities to determine any potential hazards that may adversely affect my participation.

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\_\_\_\_\_ I understand that anyone with a pre-existing condition is encouraged to have an I.D. bracelet or tag that lists all information vital to the condition.

\_\_\_\_\_ I understand that as a Club member I should: Maintain good mental and physical fitness for the club activities. Avoid being under the influence of alcohol or dangerous drugs when participating. Keep proficient in my dance/sport skills, striving to increase them through continuing education and reviewing them in controlled conditions after a period of inactivity. Be familiar with my level of physical and mental activity and restrictions (if any). Obtain a formal orientation from a knowledgeable, local source. Do not engage in any Club activity if it is not allowed or recommended by a physician. Use complete, well-maintained, reliable equipment with which I am familiar; and inspect it for correct fit and function prior to each use.

\_\_\_\_\_ I affirm, to the best of my knowledge that I am in good physical and mental health and free from cardiovascular, respiratory or other diseases or ailments, which could endanger my performance.

\_\_\_\_\_ I affirm that I am of lawful age and legally competent to sign this waiver, or that I have acquired the written consent of my parent or guardian.

\_\_\_\_\_ I affirm that I will be respectful of fellow club members, will not harrass, dispagarage, a fellow club member, officer, or employee, staff.

\_\_\_\_\_ I consent to pay any programming fees for club activities that I choose to be involved in and acknowledge the club's return/cancellation/refund policy.

\_\_\_\_\_ **(Applicable to Alumni applications only)** I affirm that I am an Alumnus of Rutgers University, and that sporadic checks may be made verifying my alumni status. I understand and accept that the Rutgers DanceSport Alumni Club reserves the right to reject, rescind, terminate my application and any future applications for membership should I falsely apply or have applied as an Alumni and may not be allowed to participate under any other status of membership in the future.

**In full awareness of the above and in consideration of my participation in Club activities, I waive, release and discharge any and all claims for death, personal injury or property damage against The Rutgers DanceSport Alumni Club, The Rutgers Alumni Association, Rutgers The State University, and each organization's officers, agents and employees, which I may have, or which may hereafter accrue to me as a result of my participation in the Club activities. I agree to indemnify and hold harmless The The Rutgers DanceSport Alumni Club, The Rutgers Alumni Association, Rutgers The State University, and each organization's officers, agents and employees, from any claim or loss for death, bodily injury or property damage arising in any manner out of my presence or activities in the course of participation in my Club activities. I further understand and agree that this waiver, release indemnity and assumption of risk is to be binding on my heirs and assigns.**

**I have fully informed myself of the contents of this Informed Consent and Waiver form by reading it before I signed it on behalf of myself, my heirs, and assigns.**

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

Signature for Minor: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to Minor: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name of Officer: \_\_\_\_\_

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# RETURN/CANCELLATION POLICY

### **On ALL Ticket Purchases Return Policy:**

There will be NO REFUNDS after receipt of payment or cancellation for ticket purchases. All pre-paid tickets may be picked up the day of the event at "will-call" which will be assigned by last and first name. Please bring proper ID, and receipt of purchase to "will-call".

All VIP Table Reservation Orders must email rudancealumni@gmail.com the Name of each member in your Party for each reservation. Not doing so may result in random table assignment. Rutgers DanceSport Alumni Club is not liable for any double bookings. Please consult your party to avoid double booking. VIP Table Reservation is limited, and on a First Come First Serve Basis.

### **On Online Website Advertising Return Policy:**

You May receive a refund of 100% if request is made in writing and postmarked within 15 days of purchase. Refunds may be Subject to a 5.0% Administration Fee If Payment is Made by Credit/Debit Card or by an Electronic Payment.

### **On ALL Program Fees, Dance Cards, Drop In Fees:**

There will be NO REFUNDS after receipt of payment or cancellation of purchase except for medical sickness or illness. If sickness or illness occurs, please submit your request in writing to: Rutgers DanceSport Alumni Club, PO Box 73, Fords, NJ 08863, as early as possible. The Rutgers DanceSport Alumni Club reserves the right to issue a credit for refund requests that are not accompanied by a physician's letter.

MEMBER'S COPY