

ALZA ACTING STUDIO

Registration Form: Disclaimer, Terms, and Conditions

To participate in classes and associated activities provided by Alza Acting Studio and/or Alza 44films Ltd. (collectively, “AAS”), please review and complete this form, which outlines applicable terms and conditions and includes a waiver of liability.

Participant Information

Full Name: _____

Date of Birth: _____

Age: _____

Gender: _____

Street Address: _____

City: _____

Postal Code: _____

Phone Number: _____

Email Address: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Terms and Conditions

I, _____ (the “Participant”), hereby acknowledge and agree to the following terms and conditions in consideration for being allowed to participate in classes and associated activities organized and/or provided by AAS:

Studio Rules and Policies

1. All students must arrive 15 minutes before the scheduled class start time.
2. No food or drink is permitted in the studio except for bottled water.
3. Wet footwear is not permitted in the studio. Please bring an extra pair of dry shoes to change into at the studio.
4. AAS will provide digital copies of sides (scripts) in advance of class, however, hard copies are not provided by AAS. The Participant is expected to bring their own hard copies of sides and have a pen and paper to take notes.

5. The Participant is prohibited from recording classes, other participants, and/or class instructors, however, AAS will record takes of the Participant's assigned scenes, which may be available for purchase. Please inquire with AAS for details.
6. All recording devices, such as cellphones, iPads, tablets, watches, or any other electronic/recording device are not allowed in the working area of the studio where classes are held.

Cancellation and Refunds

1. If registration is canceled more than 2 weeks before the respective class start date, the Participant is entitled to a 50% refund of registration fees.
2. No refund will be provided for registration cancellations within 2 weeks of the class start date.
3. The Participant may not reschedule classes or attend make-up classes if the Participant is absent. If the Participant does not show up or fails to attend class for any reason, they forfeit their entitlement to that class.
4. If an instructor becomes unavailable to conduct a class, the class will be rescheduled by AAS and/or another professional instructor from AAS will teach the class.

I hereby declare that I have reviewed the above information and agree to comply with the terms and conditions. I acknowledge that failure to comply with the terms and conditions may result in my expulsion from AAS classes without refund.

I further understand and agree that this registration form, along with the attached Liability Waiver, must be signed and submitted to AAS at least 48 hours before attending any AAS class and that I cannot participate in any class or activities without signing this form.

Name: _____ Date: _____

(Printed)

Signature of Participant*: _____

*Parent/Guardian if Participant is under 18 years of age

LIABILITY WAIVER

I, _____ (the “**Participant**”), hereby acknowledge and agree to the following terms and conditions in consideration for being allowed to participate in classes and associated activities organized and/or provided by Alza Acting Studio and/ or Alza 44films Ltd. (collectively, “**AAS**”):

Assumption of Risk

I understand that participating in classes involves certain risks and dangers including, but not limited to, physical injury and/or property loss or damage. I voluntarily assume all such risks and responsibilities associated with my participation in classes and attendance at AAS premises.

Release of Liability

I hereby release, discharge, and hold harmless AAS, its officers, directors, employees, agents, and representatives from any and all claims, liabilities, demands, actions, or causes of action that may arise out of or in connection with my participation in AAS classes and associated activities.

Waiver of Claims

I waive any and all claims, whether in tort, contract, or otherwise, against AAS for any personal injury, property loss or damage, or wrongful death arising as a result of my participation in AAS classes and associated activities.

Medical Authorization

In the event of an emergency, I authorize AAS and its representatives to seek medical attention on my behalf and I agree to be responsible for all associated medical expenses.

Photography and Publicity

I consent, authorize, and grant permission to AAS to use photographs, videos, and/or other media taken of me during AAS classes and associated activities, including my image and likeness, for promotional and marketing purposes, as well as for use in any documentary, film, or motion picture that AAS and/or Walter Alza may produce.

I am aware that by giving this consent, authorization, and permission, I am permitting personal information about me to be published, which can be viewed by anyone who accesses or views AAS’s website, publications, and/or productions, and that if consent were withheld, such publication would not occur.

Governing Law

This waiver shall be governed by and construed in accordance with the laws of the Province of Ontario.

I have read and understand this Liability Waiver, and I voluntarily agree to its terms.

Name: _____

Date: _____

(Printed)

Signature of Participant*: _____

*Parent/Guardian if Participant is under 18 years of age