**STUDIO INFORMATION FORM:**

**INTERNATIONAL FINE ARTS ASSOCIASION**

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**Please confirm which information you would like to receive:**

1. **\_\_\_\_\_\_\_\_\_\_ DANCE AWARDS**
2. **\_\_\_\_\_\_\_\_\_\_ INTERNATIONAL SA CHAMPIONSHIPS**
3. **\_\_\_\_\_\_\_\_\_\_ GRAND PRIX**
4. **\_\_\_\_\_\_\_\_\_\_ EXAMS**

**Name of Studio: ...........................................................................................................................**

**Name of the responsible person: .......................................................................................................**

**Surname: …………………………………………………………………………………..**

**First Name: ……………………………………………………………………………..........…**

**Residential address: ...………………………………………… ……………………….. ……….**

**…………………………………………..Postal code: …...................…..**

**Postal address: ………………………………………………… Postal code: ......................**

**Area of Studio: ...................................................................................................................................**

**Telephone : Cell: ………….............................………**

**Additional contact number: …………………………….**

**E-Mail: …………....................................................**

**I, as parent/guardian or instructor hereby concur, and agree to defend, indemnify and hold guiltless the International Fine Arts Association, from and against any and all liability, loss, damages, claims, or actions (including costs and attorney fees) for bodily injury and/or property damage to the extent permissible by law, arising out of, or in connection with the International Fine Arts Association competitions, properties, facilities and or services.**

**I undertake not to participate in any defamation of character regarding International Fine Arts Association whatsoever, be it in any social media (Face book, Twitter, etc) or in any other public media ( television, newspapers, magazines, etc.). I accept the fact that I may be prosecuted by law and that all costs will be to my own account.**

**As parent / Guardian or instructor, I undertake to approach the management of IFAA personally should I have any queries and will accept the outcome of their decision.**

**Signature: .............................................. Date: …………………………Place:……………...………**

**Witness: 1………………………………………**

**Witness: 2………………………………………**