

DANCE CENTER STAGE
SUMMER REGISTRATION FORM

Student name: _____ Age: _____ DOB: _____
Address, City, State & Zip: _____

Parent/Guardian name(s): _____
Phone number: _____ Alternate number: _____
Person financially responsible: _____
Address (if different from above): _____
Phone number (if different from above): _____ Email: _____

Emergency Contact (someone other than parent): _____
Phone number: _____ Relationship to student: _____

List any problems, health or otherwise, medications and allergies that the instructor should be aware of: _____

IF THE PARENT/GAURDIAN OR EMERGENCY CONTACT LISTED ABOVE CANNOT BE REACHED IN THE EVENT OF AN EMERGENCY, AND IF IMMEDIATE OBSERVATION OR TREATMENT IS URGENT IN THE OPINION OF THE INSTRUCTOR, DO YOU AUTHORIZE DANCE CENTER STAGE TO SEND FOR EMERGENCY HELP BY DIALING 911? (CIRCLE ONE) YES OR NO

List previous dance/gymnastics/performing arts experience: _____

How did you hear about us? _____

CLASSES AVAILABLE:

- ROCKIN' TOTS (20 MONTHS - 3 YEARS OLD) _____
- PRE-DANCE MOVEMENT COMBO (3 - 4 YEARS OLD) _____
- TINY BALLET (5 - 6 YEARS OLD) _____ TINY TAP (5 - 6 YEARS OLD) _____
- TINY HIP HOP (5 - 6 YEARS OLD) _____ BALLET/TAP COMBO (7 AND UP) _____
- BALLET (7 AND UP) _____ TAP (7 AND UP) _____ JAZZ/HIP HOP (7 AND UP) _____
- CLOGGING (7 AND UP) _____ PERFORMING CLOGGING (BY AUDITION) _____
- AEROBICS CLASS _____ BALLROOM DANCE _____
- SOLO CLASS _____ DUO/TRIO _____

PLEASE LIST TYPE OF CLASS FOR SOLO AND TYPE OF CLASS AND WITH WHO ELSE FOR DUO/TRIO.

Days and Times available for summer classes: _____
(PLEASE LIST ALL DAYS AND TIMES AVAILABLE)

LIABILITY RELEASE - I, the undersigned, will not hold Dance Center Stage, owners, staff, or instructors responsible for any injury occurring during class or as a result thereof; and should any injury occur, will not bring any claims, actions, demands, or suits against Dance Center Stage, their owners, staff, or instructors at any time. I have read and understand the above statement. Student cannot participate if waiver is not signed.

SIGNED _____ DATE _____

(Parent or legal guardian if student is under 18 years old)