



**REGISTRATION FORM 2009 - 2010**

**STUDENT INFORMATION**---Please PRINT LEGIBLY and fill out form completely.

Student #1 \_\_\_\_\_ Birth Date \_\_\_\_\_ Age in Years \_\_\_\_\_

Student #2 \_\_\_\_\_ Birth Date \_\_\_\_\_ Age in Years \_\_\_\_\_

E- Mail to receive correspondence \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_ Other \_\_\_\_\_

(REQUIRED) Drivers License # \_\_\_\_\_ State \_\_\_\_\_

Father/Guardian Name \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_ Other \_\_\_\_\_

(REQUIRED) Drivers License # \_\_\_\_\_ State \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Medical conditions, allergies or physical limitations we should be alerted to?  
 \_\_\_\_\_

**CLASS INFORMATION**

Student #1		Student #2	
1st Class _____	Day _____	1st Class _____	Day _____
2nd Class _____	Day _____	2nd Class _____	Day _____
3rd Class _____	Day _____	3rd Class _____	Day _____
4th Class _____	Day _____	4th Class _____	Day _____
5thClass _____	Day _____	5th Class _____	Day _____
6th Class _____	Day _____	6th Class _____	Day _____
7th Class _____	Day _____	7thClass _____	Day _____
8thClass _____	Day _____	8th Class _____	Day _____
9thClass _____	Day _____	9th Class _____	Day _____
10thClass _____	Day _____	10th Class _____	Day _____

**For Office Use Only**

Total Hours: \_\_\_\_\_

Reg. Fee: \$ \_\_\_\_\_

Tuition: \$ \_\_\_\_\_

Family Discount: \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

**Note: Please see reverse side for Risk & Waiver of Liability.**

**ASSUMPTION OF RISK & WAIVER OF LIABILITY ----PLEASE READ CAREFULLY**

I, the undersigned, recognize and understand the risk of physical injury inherent in dance and dance training, and I am willing to assume those risks. Instruction of dance may require the teacher to have physical contact with the student during the class to correct body placement in order to avoid injury. I hereby release the Academy of Dance and all their affiliated entities from any and all liability, claims, demands, and causes of action for personal injury, property damage, and/or other loss suffered in connection with class, rehearsal, performance, and participation at either the facility of Academy of Dance, or other performance locations. The student agrees to allow the Academy of Dance unrestricted use of all photographs, videotape, and films by the Academy of Dance for advertising and promotional purposes, I understand that it is my responsibility to safeguard my personal property and realize it is not the responsibility of the Academy of Dance.

I have read the above and the Academy of Dance Policies, and do agree to all conditions stated therein.

Adult/Guardian Signature\_\_\_\_\_