

Studio 360 Registration

Student: _____ Age & Grade: _____

School: _____ Class/Camp requested: _____

Dance Experience: _____

Parents: _____

Address: _____

City & State: _____ Zip: _____ Phone #: _____

Allergies/ Medications: _____

Emergency Contact(s): _____

Family Email(s): _____

How did you hear about us? _____

For summer camps only: (PLEASE CIRCLE) T-shirt size: Child XS/S/M/L Adult S/M/L/XL

Registration fee: \$35 Tuition Payment: \$ _____ Total Due: \$ _____

Make checks payable to studio 360.

PHOTO/IMAGE RELEASE

We ask your permission to include your child's photographs, likeness, or video footage on the studio 360 website, Facebook page, or any other internal or external publications. Your child's full name will never appear with these images. No compensation will be given for the use of these images and/or likenesses.

---- I grant for my child's image and/or likeness to be used in the manner described above.

---- I DO NOT grant permission for my child's image and/or likeness to be used in the manner described above.

Parent signature _____ Date _____