

JNS Dance

Summer Camp Registration Form 2022

Dancer's Name: _____

DOB: _____ Age: _____

Parent's Names: _____

Home Phone: _____ Cell: _____

Email: _____

Address: _____

Emergency Contact – Name: _____

Phone Number: _____

Allergies or Health Concerns: _____

I hereby give _____ permission to participate in dance activities with JNS Dance (Dance in Dorchester). I understand that dance is a physical activity and therefore runs the risk of accidents or injuries. I, as the parent/guardian, release JNS Dance and Dance in Dorchester programs from any liability or claims of injury, sickness or disability that occurs during class, rehearsals, camps or performances with JNS Dance.

Photo Release:

I authorize the publication of the pictures taken on behalf of JNS Dance of _____ to be used in promotional materials for JNS Dance.

Parent/Guardian Name: _____ Signature: _____
(please print)

Date: _____

JNS Dance representative to fill in:

<i>Class/Camp</i>	<i>Cost</i>	<i>Discount</i>	<i>Additional Fees</i>	<i>Total</i>

Amount Paid: _____ Received by: _____ Cash/Cheque/EMT
(initial and date)