**

Dance Day Camp

Registration Form

$45 each camp

**Student Information**

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participating Parent Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age by June 1 \_\_\_\_\_\_\_ Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

New TDA Student Current TDA Student Returning TDA Student

Any physical limitations or health problems?

**Parent Information**

Mother Father

Cell # Cell #

Text? Yes No Text? Yes No

**Primary E-Mail Address**

DO NOT LEAVE BLANK! Write clearly!

**Emergency Contact Other Than Mother or Father**

Name Phone

**How did you hear about The Dance Academy?**

**Please Initial:**

\_\_\_\_\_I understand Tuition payment is due at the time of registration and is non-refundable.

**Liability Release**

I agree to release The Dance Academy and its employees from liability for any and all damages or injuries

that may occur as a result of participation in class, rehearsals, performances or activities involving

The Dance Academy.

Parent/Guardian Signature Date

**\*Office will fill out this section:** Class Roster Email Distribution List

Payment \_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_ CK #\_\_\_\_\_\_\_\_\_\_ CASH\_\_\_\_\_\_\_\_\_ CC\_\_\_\_\_\_\_\_\_

Ballet Day Camp

Jazz Day Camp

Hip-Hop Camp

Combo Day Camp