



Registration Form for School Year 2016-2017
(please print clearly)

\$25.00 RECREATIONAL REGISTRATION FEE
\$35.00 COMPANY REGISTRATION FEE
(Company Registration Fee Due First Day of Fall Classes)
(registration fees are non-refundable)

***Today's Date:** _____
***Class Start Date:** _____

Dancer - Last Name _____ **Dancer – First Name** _____

Age _____ **Sex** _____ **Dob** / / _____

Home Phone _____ **Cell Phone** _____

Address _____ **City** _____ **Zip Code** _____

Student Grade (If Applicable) _____ **E-Mail** _____

COMPANY LETTER (for staff use only) _____

RECREATION (Please circle all that apply) Tap Ballet Jazz Lyrical Hip-Hop Jazz Technique
Dance Development Other _____

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PARENT OR GUARDIAN INFORMATION IF STUDENT IS UNDER AGE 18

MOTHER

Name _____ **Home Phone** _____

Address _____ **City** _____ **Zip Code** _____

E-Mail _____ **Cell Phone** _____

FATHER (If home address and phone are same as above you may leave blank)

Name _____ Home Phone _____
Address _____ City _____ Zip Code _____
E-Mail _____ Cell Phone _____

GUARDIAN

Name _____ Home Phone _____
Address _____
E-Mail _____ Cell Phone _____

EMERGENCY CONTACTS (PLEASE PROVIDE AT LEAST ONE)

Name _____ Phone _____
Name _____ Phone _____

Release of Liability

I release and waive any claims of personal injury or property damage that I may have or come to have against K.Monique's Studio of Dance, it's employees, representatives, and instructors. I further understand that participation will not be permitted until the fee is paid in full. Full refunds are only granted if K.Monique's Studio of Dance cancels the program(s). Other refunds are subject to an approval and service charge.

Signature _____ Date _____

Photo Media Release

I hereby grant K.Monique's Studio of Dance the right to use, reproduce, and/or distribute photographs and/or video of myself or my child in their promotional materials.

Signature _____ Date _____