

Dance Makers Registration Form

Payment Options available at www.dance-makers.com

Please print as clearly as possible, Thank you

Student Name: _____ / _____ / _____
(Last) (First) (Middle)

Birthdate: ____ / ____ / ____ Age: ____ E-mail: _____

Class Location Day/ Time: _____ Home Phone: _____

Street Address: _____ Cell Phone: _____

City: _____ Zip Code: _____ Work Phone: _____

Mother's Name: _____ Father's Name: _____

Person paying bill: _____ All monthly statements will be sent via e-mail. E-mail address statement to be sent to if different from above _____

Does your child have any disabilities? ____ Allergies? ____ If so, please describe so I can better serve your child's needs: _____

I, _____, understand that I am responsible for the monthly payments that have been established. These monthly payments are due by the 10th of each month, payments received after this date will incur at \$10.00 late fee. If you decide to discontinue lesson please notify Ms. Jennifer 30 days prior to date of withdrawal. If no notice is given, you will be responsible for the entire month. You also acknowledge that you have received, read, and will comply with the policies stated in your welcome letter.

Permission for Photography

Once in a while, Dance Makers would like to take photos/videos of our little dancers. These photos might be used to prepare small souvenirs for the children and parents and/or possibly to be used by Dance Makers for their own advertising. **THE PICTURES ARE NOT USED WITHOUT YOUR PERMISSION.** I allow photos of my child to be used as follows (please check one, both, or none):

_____ for internal use only (within students, parents, class use)

_____ for any publicity and/or advertisement of Dance Makers classes

Liability Waiver

I do, on behalf of my child expressly agree that Dance Makers its teachers and all participating schools shall not be liable for any damages arising from personal injuries sustained by my child during any dance instruction. I accept full responsibility for any such injuries or damages, which may occur to my child, during said instruction.

Signature : _____ Today's date: _____