

Dancer's Corner

School of Dance Art
DCSDA

Registration Form

To register: Return this form along with non-refundable registration fee of \$25.00. **MONTHLY PAYMENTS MUST BE RECEIVED BY THE 5TH OF EACH MONTH.** Make checks payable to: **Dancers Corner.**

Student's Name: _____

Date of Birth _____ Age Now _____ Sex _____

Student's Home # _____

Email Address _____

Street Address _____ City _____ Zip _____

Students School _____ Grade _____

Classes: Please check all classes you are interested taking.

* See Prerequisite

_____ Creative Movement

_____ Combo; Beginner: Ballet/Tap/Gymnastics

_____ Ballet _____ Pre-Pointe _____ Pointe *(Director and Instructor will evaluate these candidates)*

_____ Tap *

_____ Jazz (Modern, African, Lyrical, Traditional)*

_____ Hip Hop* _____ Boys Hip Hop/Tap _____

_____ Daycare Center Program _____ (Name of Center)

Adult

Office Use Only

Class _____

Class Number _____

Class Day _____

Class Time _____

Prior Dance Experience

Years of Dance _____ Forms of Dance _____

Location _____

Mother's Name _____ Home # _____ Work # _____

Cell # _____ Mother's Occupation _____

Father's Name _____ Home # _____ Work # _____

Cell # _____ Father's Occupation _____

IN AN EMERGENCY, WE WILL CALL PARENTS FIRST; WHOM SHOULD WE CALL AFTER OR OTHER THAN THE PARENTS?

Second Contact _____

Home # _____ Work # _____ Cell # _____

Hospital Preference _____

Physician _____ Office # _____

List any medical problems/food allergies or concerns that the instructors and staff need to be aware of: _____

Any medications that the student is currently taking _____

A PARENT OR GUARDIAN MUST SIGN ALL APPLICATIONS

Read and Sign Below Dancers Corner Waiver of Liability: I hereby release Dancers Corner, it's employees, teachers, student teachers, and PDA members from any and all liability, cost or expense associated with any injury sustained by any member of my family while participating in any Dancers Corner program. I give permission to Dancers Corner to seek medical treatment in case of an emergency. I further give Dancers Corner permission to use for publication, any photo or video in which my family member appears.

In the event a student must withdraw from a class, a parent/guardian is required to notify the office in writing thirty (30) days prior to the date of withdrawal. The latest that a student can withdraw is December 1st of that calendar year. Students withdrawing at anytime during the calendar year are responsible for the remaining balance of the calendar year's tuition.

I have read and understand the Dancer's Corner policies.

Parent/Guardian Signature _____

HOW DID YOU HEAR ABOUT US?

From a friend/student _____ whom: _____ Newspaper Ads _____
Road Sign _____ other _____, Please Explain _____