



# Summer Registration Form

Date\_\_\_\_\_

Student's Legal Name\_\_\_\_\_ Age\_\_\_\_\_ Birth Date\_\_\_\_\_

Address\_\_\_\_\_ City\_\_\_\_\_ Zip Code\_\_\_\_\_

Home Phone #\_\_\_\_\_ Parent Cell Phone #'s\_\_\_\_\_

Parent Names\_\_\_\_\_ Work Phone #\_\_\_\_\_

Email Address (will not be released outside of DDA)\_\_\_\_\_

Grade in School\_\_\_\_\_ School Name\_\_\_\_\_

Allergies?-\_\_\_\_\_ Emergency Contact-\_\_\_\_\_

Dancers Health Insurance Name and Phone #\_\_\_\_\_

Policy #\_\_\_\_\_ Group #\_\_\_\_\_

Previous Dance/ Acting/ Cheer Training- # of years\_\_\_\_\_ Studio Name\_\_\_\_\_

How did you hear about us? Please place a check on the line that applies

-Returning student\_\_\_\_\_

-Flyer\_\_\_\_\_

-Friend\_\_\_\_\_ Name\_\_\_\_\_

-Internet\_\_\_\_\_

-Drive By\_\_\_\_\_

-Other\_\_\_\_\_

Classes/Camps chosen for this school year:

Camps\_\_\_\_\_ Camp Fees \$\_\_\_\_\_

Classes\_\_\_\_\_

\_\_\_\_\_ Class Fees \$\_\_\_\_\_

Registration fee (due once a year) \$\_\_\_\_\_

**All Summer fees paid are nonrefundable. Parent/Guardian Initial(s)**\_\_\_\_\_

**Total Amount Due \$**\_\_\_\_\_

**Cash, Check, or Credit Card**

I hereby acknowledge in consideration of my child's participation in the Dawson Dance and Theatre Academy's program that Jennifer Dawson-Waz, the DDA studio and its instructor's will not be held liable for ANY injuries sustained on the studio's premise. Furthermore, I hereby waive and release any claims for damages including injury to my child, myself or family members resulting from any act or failure to act by DDA and its representatives.

Legal Guardian or Student Signature (Over 18 years old) \_\_\_\_\_

Date\_\_\_\_\_