

**Dance in Motion Dance Studio**

Registration Form

Students Last Name \_\_\_\_\_

Parents Name \_\_\_\_\_ E-Mail \_\_\_\_\_

(PLEASE PRINT CLEARLY)

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_ Contact # \_\_\_\_\_

**Emergency Contact:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

**Please fill in your class style, time and then circle the day of your class!**

1<sup>st</sup> Child \_\_\_\_\_ Age \_\_\_\_\_

2<sup>nd</sup> Child \_\_\_\_\_ Age \_\_\_\_\_

Class	Time	Day	Class	Time	Day
_____		m t w th	_____		m t w th
_____		m t w th	_____		m t w th
_____		m t w th	_____		m t w th

**Consent & Liability Form:** As a student of Dance in Motion, in the event that I sustain an injury of any magnitude during my participation in all activities, I will be legally and financially responsible for any bills related to the aforementioned injury. I hereby release Dance in Motion, its facilities, instructors, employees, other student's owners and staff from any liability in the event of injury while participating in any instruction, activity or performance.

\_\_\_\_\_  
Parent/Guardian signature Date \_\_\_\_\_

**\$20.00 Registration Fee per Family**

*There will be no refunds on lesson payments made nor registration fee.*

**First month payment and registration fee due upon enrollment!**

Please enter the amount due next to the plan you have chosen

Monthly \$ \_\_\_\_\_ 5 Month \$ \_\_\_\_\_ 10 Month \$ \_\_\_\_\_

***Your account must be paid in full to receive recital costumes and perform in the June recital..***