



## 2011-12 Registration Form

\_\_\_\_\_  
Student Name (Last, First)

\_\_\_\_\_  
Age

\_\_\_\_\_  
Birthdate

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Parent (Guardian) Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Alternate Number

\_\_\_\_\_  
Emergency Contact

\_\_\_\_\_  
Emergency Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Allergies/ Medical Information

\_\_\_\_\_  
Years at Allison's

The undersigned parent or guardian understands that the student will be engaging in physical activity that contains a risk of physical injury. The undersigned hereby assumes this risk and, in doing so, releases Allison's Dance Academy and its employees from any and all liability for personal injury arising from the participation in the dance classes of the 2011-2012 dance year.

The undersigned parent or guardian understands that the registration fee is non-refundable and is due when the applicant registers for classes. Monthly tuition is due on the 1<sup>st</sup> of each month and is late after the 10<sup>th</sup>. A \$10 late fee will be charged after the 10<sup>th</sup>. A \$25 return check fee will be charged for any returned check.

\_\_\_\_\_  
Signature of Parent (Guardian)

\_\_\_\_\_  
Date

Mommy & Me

Ballet

Preschool

Tap

Combo Class

Jazz

Performance

Clogging

**Monthly Tuition** \_\_\_\_\_

<b>Payments</b>	<b>Amount</b>	<b>Date Paid</b>
Registration Fee		
September		
October		
November		
Costume Deposit		
December		
January		
February		
Costume Balance		
March		
April		
May		
Recital Fee		

**Photo Use:**

I  do  do not give Allison's Dance Academy permission to photograph my child and submit photos for use in brochures or local newspapers.

I  do  do not give Allison's Dance Academy permission to photograph my child and submit photos for use on the studio website.

\_\_\_\_\_  
**Signature of Parent (Guardian)**

\_\_\_\_\_  
**Date**