

Mauri's School of Dance, Inc.

2017-18 Registration form

Please fill out and return with the \$35.00 registration fee

Dancer's

Name _____ **Age** _____ **Birthdate** _____

Address _____ **City** _____ **Zip Code** _____

Parent Name(s) _____

Cell # _____

EMAIL _____

Special needs, illnesses, allergies we should know about:

Notification of Risk Waiver

I hereby give permission for my child/children _____ to participate in activities at Mauri's School of Dance, Inc. I am assuming all risks and hazards incidental to the conduct of these activities and the transportation to and from these activities.

My child has no physical condition that would limit his/her participation in dance class. In case of an emergency, Mauri's School of Dance, Inc.'s staff has my permission to use their best judgment with regard to treatment until I can be contacted.

Date

Signature, Parent or Guardian

***I have read and understand the studio policies for payment late charges, returned check fee, watch week, and recital fundraiser/buy-out.**

Signature

**Please register me for the same class times I was in during the 2016-17 dance season:
Yes or No**

I would like to add the following class(es) to my schedule: _____

Mauri's School of Dance, Inc uses photography for publicity via brochures/website purposes (Please check appropriate box below)

I grant permission for Mauri's to use any/all photos of my child _____ I do not grant permission to use photos _____

How did you hear about us?

Newspaper WEB site Parade Referred By: _____ Other _____