



Dance-N-Drill

Student Registration Form
2016-2017

Student's Name: _____

Address: _____

City, State: _____ Zip Code: _____

Grade for 2016-2017: _____ School: _____

Age: _____ Date of Birth: _____

Mother's Name: _____ Cell Phone: _____

Dad's Name: _____ Cell Phone: _____

Mom's E-Mail Address: _____

(Needed for important Correspondence)

Dad's Email Address: _____

(Needed for important Correspondence)

Mother's Workplace: _____ Phone: _____

Father's Workplace: _____ Phone: _____

Years at Dance-N-Drill (*Including this upcoming year*): _____ Years at other studios: _____

Former Studio: _____

Anything we need to know about your child? (health issues, learning disabilities. etc.) _____

I hereby waive any and all claims or rights of action against Dance-N-Drill for damages and/or injuries to my child/children while participating in classes or any other outside activity (including travel to and from Dance-N-Drill sponsored events). I consent to video spots and photographs of my child participating in activities for promotional use only.

Parent/Legal Guardian's Signature: _____ Date: _____

OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

CLASS DAY: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

CLASS TIME: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

TEACHER: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

REGISTRATION FEE: \$ _____

RECITAL FEE: \$ _____

COSTUMES: \$ _____

SEPTEMBER TUITION: \$ _____

CASH: _____ CHECK#: _____ AMOUNT: _____