

**BALLET-TAP-JAZZ PLEASE PRINT!!**

CHILD's NAME \_\_\_\_\_

Date of Birth \_\_\_\_\_ AGE: \_\_\_\_\_

Parents Names: \_\_\_\_\_

Address: \_\_\_\_\_

City State Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Mom's Work Place & Number \_\_\_\_\_

Dad's Work Place & Number \_\_\_\_\_

Print Email: \_\_\_\_\_ @ \_\_\_\_\_

Any Existing injuries or conditions we should be aware of? Yes No  
Describe \_\_\_\_\_

**FALL CLASS: Sept 13-Dec 8<sup>th</sup>  
6-10 AGE \_\_\_ or 11+ Age \_\_\_**

\_\_\_ Ballet ONLY \$250 (\$225 Cash/check)

\_\_\_ Ballet/Tap/Jazz \$350 (\$325 Cash/check)  
(Excludes week of Thanksgiving Nov 22)

**\*\*NO REFUNDS unless we cancel the class**

I agree to forever relieve and hold harmless the Dance Centre, its instructors, staff and other customers from any and all liability or damages resulting from either personal injury or theft or loss of personal property whether or not due to the negligence of the Dance Centre. Further I understand the refund policy and the tuition package policies. The Dance Centre reserves the right to cancel classes if minimum attendance is not met and issue refunds at their sole discretion.

Parent Signature

\_\_\_\_\_ Date \_\_\_\_\_

Dance Centre Representative Signature:

\_\_\_\_\_ Date \_\_\_\_\_

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