

Garlynda's Fancy Feet
Registration Form (Year)_____

PARTICIPANT'S NAME_____

BIRTHDAY_____Age_____

PARENTS_____

PARENTS E-MAIL_____

PHONE#(HOME)_____ CELL_____ WORK_____

DANCER'S CELL_____ DANCER'S E-MAIL_____

ADDRESS_____

NOTIFY IN CASE OF EMERGENCY_____

(OTHER THAN PARENTS---INCLUDE NAME & NUMBER)

DANCE EXPERIENCE_____

LOCATION & # OF YEAR

CIRCLE CLASS (S) to be determined by instructor

Combination Dance (45 minute class)
(Tap & Ballet)

Combination Dance (60 minute class)
(Tap, Ballet, Jazz) [when instructed]

Combination Dance (75 minute class)
(Tap, Ballet, Jazz)

Combination Dance (75 minutes)
(Tap, Ballet, Jazz) clogging [when instructed]

Hip-hop (Doina' Jeter-instructor) all ages

Clogging (Melissa Stull Instructor)(beginner)

Gymnastics (60 minute class)
Preschool (3-4) School Age (5-12)

Gymnastics (30 minute class)
Mom and Tot (12 m - 2) Parents must attend

DATE_____REGISTRATION PAID_____ (check or cash)

\$20 Before June 1st /\$25.00 after June 1st and new students

_____ has permission to participate in dance classes at GARLYNDA'S FANCY FEET. I adhere to all the guidelines, procedures and decisions pertaining to the operation of Garlynda's Fancy Feet in reference to dance, tumbling, performance, and related practices and performances

(PARENT'S SIGNATURE)

(DATE)

(OVER)

OTHER INFORMATION: _____
(Medical, requests, etc.) _____

Photographic Release

I give permission for photographs of my child in dance/tumbling/ baton class or performance to be used in promotional material for Garlynda's Fancy Feet in both internet and print publications

Child's Name _____

Parent/Legal guardian _____ Date _____

RELEASE FROM LIABILITY: I, the undersigned parent/guardian of _____, recognizes that classes involving physical activity may result in personal injury, do hereby release, discharge and agree to hold harmless and safe from all liabilities Garlynda's Fancy Feet, its officers, agents, employees and independent contractors from any and all claims, demands, rights, actions and clauses of action arising out of the activities of said business, specifically including dance, tumbling, related classes practices and performances, on account of or in any way arising out of any and all known and unknown personal injuries and property, including consequential damages, which I may now or hereinafter have as the parent/legal guardian of this said minor on his or her own behalf.

In the case of emergency, if I cannot be reached, I authorize Garlynda's Fancy Feet, its agents and employees, to contact and secure medical attention for my child or me. I have taken the necessary steps to obtain accident, health, or hospitalization insurance that would cover any sustained injury.

Parents are responsible for the safe and timely drop-off and pick-up of all students.

(PARENT'S/LEGAL GUARDIAN SIGNATURE)

(DATE)

