



# 2019 Fall Dance Program Registration Form

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Allergies \_\_\_\_\_  
 Street Address, Town, Zip \_\_\_\_\_  
 Parents' Name \_\_\_\_\_ Email \_\_\_\_\_  
 Cell Phone \_\_\_\_\_ *Text message opt-in for emergency studio closings: Yes \_\_\_ No \_\_\_*  
 \_\_\_\_\_  
 Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_  
 Homeroom Teacher's Name \_\_\_\_\_

	Class	Dates	Time	Tuition
Please check class	Grades K-2 Ballet & Tumbling	Tuesdays, October 1, 8, 15, 22, 29, November 5, 12, 19, 26, December 3, 10, 17, January 7, 14, 21	2:45-3:45 pm	\$262
	Nursery & Pre-K Ballet / Creative Movement	Thursdays, September 26, October 3, 10, 17, 24, November 7, 14, 21, December 5, 12, 19, January 9, 16, 23, 30	2:15-3:00 pm	\$262
	Grades 3-5 Hip Hop	Thursdays, September 26, October 3, 10, 17, 24, November 7, 14, 21, December 5, 12, 19, January 9, 16, 23, 30	2:45-4:00 pm	\$262
	Grades 6-8 Choreographers Club	Thursdays, September 26, October 3, 10, 17, 24, November 7, 14, 21, December 5, 12, 19, January 9, 16, 23, 30	2:45-4:00 pm	\$262

Payment Options
Check one: <input type="checkbox"/> Full payment due by first class <input type="checkbox"/> Two equal payments due by first class and November 7

Dance Apparel	Yes	No
To purchase quality ballet shoes for your child for \$29.30 (includes tax), check "Yes" and include a separate payment by cash or check payable to Great South Bay Dance LLC		

**Consent and Release:**

I, the undersigned parent/guardian of \_\_\_\_\_ ("my child"), a minor, do hereby consent to my child's participation in Great South Bay Dance LLC' dance clubs. I also agree to forever release St. Martin of Tours School, Great South Bay Dance LLC, their respective owners, and their employees from any and all claims or liability that may arise from my child's participation in the dance clubs. I hereby grant Great South Bay Dance LLC and its employees the right to photograph my child and use photos and/or other digital reproductions of her/him for promotional purposes, whether print, digital, or electronic publishing. I further affirm that I have read this Consent and Photo Release Form and understand its contents.

Parent/Guardian Name: Print \_\_\_\_\_

Sign & Date \_\_\_\_\_

**Registration Directions:**

Submit tuition check, payable to St. Martin of Tours School, with completed registration form(s) for each dancer to Ms. Kerry Henzy. Write "Dance Program" on envelope. Ballet shoes should be paid separately by cash or check payable to Great South Bay Dance LLC.