<u>Dance Centre North Summer Dance 2019 Registration Form:</u> (Must be completed in FULL for School enrollment – please print legibly)

Student's Name:			
Parent's Name:			
Address:			
City:	State:	Zip:	
Email:			
Home Phone: Cell Phone:			
Emergency Phone Number:			
Age: D	OB:	Grade:	
Former Training (new student's o	only):		
	ER CAMP BLAST JULY 8 TH – 12 TH FROM AM JULY 8 TH – AUGUST 8 TH : (LIST LEVE		
Tuition payments are payments are payments registering for the entire fee, unless the be submitted to the School the Summer Studies has returned checks. IF YOU ARE UNABLE TO RATED RATES FOR MISSE In order to reserve your Form and a \$25.00 non-Non-Refundable Yearly I Liability/Waiver Statement: I/We reprecautions, accidents and injuries and all spaces used by Dance Centrused, from any cause of action, clapersonal injury, personal property digatherings. I/We hereby assume all to collections, you (parent/guardian)	t division, will only be allowed with the Dayable in full at the time of registration or the Summer Intensive. Students are regay are unable to attend due to injury or hool/Director for non-liability of the full tust begun. Make-up Classes may be done or REGISTER FOR THE ENTIRE PROGRAM, PED WEEKS IS NO LONGER APPLICABLE. Mischild's placement in Summer Studies or refundable deposit (APPLICABLE TO TO Registration Fee is due for NEW STUDEN alize that participation in dance classes and may occur. By signing below, I/We (the stude North. In addition, I/We agree to hold he ims or demands now and in the future. I/V amage, theft or loss, which may occur on the financial responsibility for the above regist agree to be held liable for ALL collection feel hereby nee Centre North and will fully comply	with a \$20.00 Non-Refundable istering for the entire Summer realth reasons, at which point a sition due. There are no refunds with approval in other class less and the entire Summer realth reasons, at which point a sition due. There are no refunds with approval in other class less at the entire series and the entire series at the entire series at the entire series at the entire series at the entire series including legal fees, interest, at which the entire series at the entire series in the entire series including legal fees, interest, at the entire series in the entire	Studies (5 weeks) and are liable for a doctor's diagnosis and letter must be a specific and a specifi
Students Name:			
Parent's Signature:			Date:
	NON-REFUNDABLE YEARLY REGISTRA		
TOTAL AMOUNT DUE:	PAID BY CAS	H/CHECK	DATE