

## STUDENT REGISTRATION FORM



## **STUDENT INFORMATION:**

Last Name:		First Name:			
		Parent's Name			
Age (as of 7/1/24):		(if under 18):			
Street Address:		City, Zip:			
Phone:		Email Address:			
Person to Notify		Emergency			
in Emergency:		Contact Phone:			
RELEASE: I RELEASE AND HOLD DANCE VISIONS NETWORK, THE FACULTY, AGENTS, AND STAFF, HARMLESS FROM ANY AND ALL INJURIES SUSTAINED WHILE PARTICIPATING IN THE ACTIVITIES OF THE WORKSHOP ON THE PREMISES OF THE HOSTING STUDIO. I CONTEND THAT I AM IN GOOD HEALTH FOR PARTICIPATING IN THIS DANCE PROGRAM. THE PROGRAM IS HOSTED					
BY DANCE VISIONS NET					
Signature					
(Parent or Guardian if und	er 18):		D	ate:	
TUITION: \$150.00 per dancer (\$160 if no deposit is received by June 10)  Deposit: \$50.00 Due by June 10 to reserve your space, Balance due by 8:45 AM first day of the program.					
For Office Use: Total Deposit Rec'd:		Date:	_ Check # or Cash	eck # or Cash:	
Balance Due Rec'd:		Date:	Check # or Cash:		

## **ADDITIONAL INFORMATION:**

- Drop off time is 8:45am and students will begin dancing at 9:00am. Pick up time is 12:00pm.
- Students should arrive in a leotard, skirt, pink tights, with hair tied back.
- Please also bring: Shorts, Tank top/Shirt, Socks and Sneakers.
- Please be sure that everything they bring to the studio is labeled with their name.
- All students must bring a water bottle and snack.
- No observers are permitted during the camp.