

## BACKSTAGE DANCE CENTER 2011-2012 REGISTRATION

| PRINT please | STUDENT | MOTHER | FATHER |
|--------------|---------|--------|--------|
| LAST NAME    |         |        |        |
| FIRST NAME   |         |        |        |
| PHONE #      |         |        |        |
| EMPLOYMENT   |         |        |        |
| WORK PHONE # |         |        |        |
| CLASS(ES)    |         |        |        |

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_  
 ZIP \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_ ALLERGIES \_\_\_\_\_  
 EMERGENCY PHONE # \_\_\_\_\_ CONTACT NAME \_\_\_\_\_ RELATION \_\_\_\_\_  
 HOW DID YOU HEAR ABOUT US? \_\_\_\_\_

**Liability Release:** I/WE DO HEREBY AGREE to release *Backstage Dance Center* and all cooperating agencies, employees, officials, teachers, and managers, thereof, from all liability for damages by reason of injuries or property damages that may be sustained as a result of participating in the program.

**Medical Consent:** In the event of injury, I/WE DO HEREBY AUTHORIZE those officials of *Backstage Dance Center* to arrange for such medical services as may be deemed reasonable and necessary to the welfare of the injured, and I/WE DO HEREBY RELEASE *Backstage Dance Center* and all others from all liability in taking such actions.

**Consent for Use of Pictures on Web Site or Brochure:** I/WE DO HEREBY AUTHORIZE *Backstage Dance Center* to put pictures of my child on the web site or in the studio brochures.

X \_\_\_\_\_ Date \_\_\_\_\_  
 Signature of Parent/Guardian or Student if over 18 yrs old