## Russell's Dance and Baton Studio

## 2016-2017 Registration Form

Student's Full Name:			
Date of Birth: Age as of 9/1/2016			
School attending:			
Mailing Address:			
City/Town:	State:	Zip:	
Home Telephone#			
Nother's Name: Mother Cell #:			
Father's Name: Father Cell #:			her Cell #:
The Russell's Studio's de Please list an email addr	-		mail, dates, schedules, ect.
Russell's Studio's do tak on website and for prom	•	•	c. Please check if allowed to use o
Please advise us of any	medical conditions	<b>:</b> :	
across the floor combinations, the activities of the dance class paying tuition/fee's on time an for the students and staff at the participate.  I, parent and/or guard whatsoever my arise as the result Baton and Dance, it teachers, con	dance routines in the sign involve some degree of respecting deadlines e studio. I hereby ackrolian, hereby waive any right of any occurrence from aches, member, and etc. is, or loss sustained out of	center, and other related of risk of strain or bodies, by being professional nowledge that I have reall that or cause of action of a which any liability may of the students and their page.	ncing with props, stretching, barre work, d activities. I further understand that all of ly injury. I agree to be responsible for in the studios, and having utmost respect ad the statements above and agree to my kind, both now and in the future for recould accrue to the Russell's School of trents hereby assume all risk and its or activity held by or in conjunction with the
Date: Pa	rent Signature:		
Please fill in classes and		enroll in	
1			
2			
3			
4			
5			
6			