Russell's Dance and Baton Studio

Registration Form

Student's Full Name: _____
Date of Birth:_____ Age as of 9/1/2017_____
School attending:_____
Mailing Address:_____
City/Town:_____ State: _____ Zip:_____
Home Telephone#_____
Mother's Name: _____ Mother Cell #:_____
Father's Name: _____ Father Cell #:_____
The Russell's Studio's do send out important information via email, dates, schedules, ect. Please list an email address that we can contact you at:

_____

Russell's Studio's do take pictures during shows, practices, etc. Please check if allowed to use on website and for promotional advertisements: Yes_____ No_____

Please advise us of any medical conditions:

_____

_____

Agreement:

I understand that dance classes may include, without limitation, dancing with props, stretching, barre work, across the floor combinations, dance routines in the center, and other related activities. I further understand that all of the activities of the dance class involve some degree of risk of strain or bodily injury. I agree to be responsible for paying tuition/fee's on time and respecting deadlines, by being professional in the studios, and having utmost respect for the students and staff at the studio. I hereby acknowledge that I have read the statements above and agree to participate.

I, parent and/or guardian, hereby waive any right or cause of action of any kind, both now and in the future for whatsoever my arise as the result of any occurrence from which any liability may or could accrue to the Russell's School of Baton and Dance, it teachers, coaches, member, and etc. The students and their parents hereby assume all risk and responsibility if any injury, illness, or loss sustained out of participation in any class or activity held by or in conjunction with the Russell's School of Baton and Dance should occur.

Date: _____ Parent Signature: _____

Please fill in summer programs you wish to enroll in:

Class	Day	Time