



Camp Registration Form

STUDENT NAME:		DATE OF BIRTH:
NAME OF PARENT/GUARDIAN:		
MAILING ADDRESS:		
HOME PHONE NUMBER:	WORK/CELL NUMBER:	
E-MAIL ADDRESS:	EMERGENCY CONTACT:	
ALLERGIES/MEDICAL CONDITIONS:		

PREVIOUS DANCE EXPERIENCE (for those new to Grace Academy)

PROGRAM REGISTRATION - PLEASE INDICATE THE PROGRAM/WEEK(S) YOU WILL ATTEND:

A NON-REFUNDABLE DEPOSIT OF \$25 FOR THE 1/2 DAY PROGRAM OR \$50 FOR THE FULL DAY PROGRAM IS DUE UPON REGISTRATION. THE REMAINDER OF THE FEE IS PAYABLE NO LATER THAN JUNE 1, 2016.

SPACE WILL BE LIMITED SO DO NOT DELAY!

I UNDERSTAND THAT HEIDI KNAPP, GRACE ACADEMY OF DANCE AND PERFORMING ARTS, AND TEACHERS OF THE ACADEMY CANNOT BE HELD RESPONSIBLE FOR ANY INJURY AS A RESULT OF ACCIDENT THAT MAY OCCUR IN CLASS OR PERFORMANCE.

I RELEASE THE ABOVE NAMED SCHOOL AND TEACHERS FROM LIABILITY IN CASE OF ACCIDENT OR INJURY.

SIGNATURE OF PARENT/GUARDIAN