

CAPE ANN CENTER FOR DANCE  
2019-2020 REGISTRATION FORM

*REGISTRATION FEE: \$35*

Last Name, First \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Tel Home \_\_\_\_\_ Cell \_\_\_\_\_

Person to notify in emergency \_\_\_\_\_ # \_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_ Misc info (medical) \_\_\_\_\_

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CLASS ENROLLMENT

CLASS:  
DAY/TIME:  
\_\_\_\_\_

CLASS:  
DAY/TIME:  
\_\_\_\_\_

CLASS:  
DAY/TIME:  
\_\_\_\_\_

TOTAL TUITION: \$ \_\_\_\_\_

I understand that the above mentioned student, while not being under the supervision of an instructor, and participating in "horseplay", non supervised dance and non students running, jumping, throwing objects, etc will not hold Cape Ann Center for Dance responsible. Cape Ann Center for Dance reserves the right to ask people to leave the premises. Parents and students will hold Cape Ann Center for Dance harmless from any injuries on or off the property including all events and will use their private health insurance to pay for any injuries.

\_\_\_\_\_ Sign \_\_\_\_\_ Date