



## Spring Registration Form 2018

Please complete the following form for each child enrolling in Momentum Dance Company for Spring Classes 2018

STUDENT NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

STUDENT GENDER: \_\_\_\_\_ SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_\_

STUDENT EMAIL: \_\_\_\_\_

PARENT/CONTACT #1 NAME: \_\_\_\_\_ RELATIONSHIP TO STUDENT: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE NUMBER: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PARENT/CONTACT #2 NAME: \_\_\_\_\_ RELATIONSHIP TO STUDENT: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE NUMBER: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

STUDENT DISABILITIES/SPECIAL NEEDS: \_\_\_\_\_

MEDICATIONS: \_\_\_\_\_ ALLERGIES: \_\_\_\_\_

CLASSES REGISTERING FOR:

TWIST (Ballet, Tap & Tumbling Combo class) Ages 3-5

\_\_\_ Monday 3:30-4:15

ACRO/TUMBLING:

\_\_\_ Acro I/II Tuesday 4:30-5:30

BALLET:

\_\_\_ Ballet I Tuesday 3:30-4:30

\_\_\_ Ballet II/III Tuesday 6:30-7:30

\_\_\_ Advanced Ballet Monday 5:30-6:45

\_\_\_ Junior Company Ballet Monday 3:45-4:45\*

\_\_\_ Company Advanced Ballet Tuesday 5:45-6:45\*

HIP HOP:

\_\_\_ Hip Hop I Tuesday 3:30-4:30

\_\_\_ Hip Hop II Wednesday 3:30-4:30

\_\_\_ Hip Hop II/III Thursday 4:45-5:45

JAZZ:

\_\_\_ Jazz I Monday 4:30-5:30

\_\_\_ Jazz II Tuesday 4:30-5:30

\_\_\_ Jazz III Tuesday 6:30-7:30

LEAPS & TURNS

\_\_\_ Open Leaps & Turns Monday 6:45-7:45

\_\_\_ Open Leaps & Turns Tuesday 5:30-6:30

TAP:

\_\_\_\_ TapI/ II Tuesday 4:30-5:30

\_\_\_\_ Tap II/ III Thursday 5:45-6:45\* requires approval

Registration Fee: \$30 for 1st dancer and \$20 each additional family member. This is non-refundable.

**Photo Release**

Photo Release: I, hereby, grant Momentum Dance Company permission to use my child's photograph/video for promotional purposes and/or social media and Momentum Dance Company's website.

\_\_\_\_ I've read the above and agree. (Please Initial)

**Release of Liability**

I understand dance can be a strenuous activity and accept responsibility for any injuries my child may incur while participating in any activity at Momentum Dance Company. Momentum Dance Company and its employees are not liable for personal injury, or loss of or damage to personal property.

\_\_\_\_ I've read the above and agree. (Please Initial)

**Please send form(s) and payment by check to:**

**Momentum Dance Company**

**818 Olive St**

**Santa Barbara, CA 93101**



