

REGISTRATION FORM



**Registration fee, recital fee, and costume deposit are due at the time of registration to reserve student placement.*

Student Information:

First Name Last Name
Date of Birth Age Sex Completed Dance Years
Address
City State Zip Code
School Attending Grade

Parent/Guardian Information:

Name Phone
Name Phone
Email
Emergency Contact (Other than Parent/Guardian)
Emergency Contact Phone Relationship to Student
How did you hear about us?

Any medical history/allergies or special needs?

NO YES *If YES, please provide details below

I agree to the capture and use of photographic images, film and sound recordings of the above named participant, for use in the documentation, evaluation, promotion, marketing and publicity of *Legacy Dance Productions*. These images and recordings may be used, reproduced and distributed in print, electronically and mechanically, including via websites and e-mails.

I understand that the information given above will only be used by *Legacy Dance Productions*.

I confirm I have read, understand, and agreed to all *Legacy Dance Productions* policies.

Signature of Parent/Guardian

Print Name
Signature

***FOR OFFICE USE ONLY**

Registration Fee (\$35) _____

Recital Fee (\$25) _____

Costume Deposit _____ Total _____

Paid Via _____