

**DANCE EXPRESSIONS**  
**Confidential Student Registration Form**  
**2016-2017 Season**

Please fill out the form below and mail it to:

**DANCE EXPRESSIONS**  
**885 Main St., Tewksbury, MA 01876**

Student's Name: \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth: \_\_\_\_\_ School Grade 9/16: \_\_\_\_\_

Address/Zip: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

Parent's or Guardian's Name: \_\_\_\_\_

Daytime or Cell Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

List any medical conditions that we should be aware of:

Referred By: Please let us know how you heard about Dance Expressions:

**REGISTRATION** \$25 registration fee (\$40 per family)  
Discounted rate until May 31, 2016 \$15 registration fee (\$25 per family)  
**Must be paid to reserve class placement for each student**

Please choose style of dance student would like to take: (circle all that apply)

New Explorers    Creative Kids    Tap    Jazz    Ballet  
(Tap & gymnastics)    (Tap, Jazz & Ballet)

Musical Theater    Pointe    Modern/Contemp    Hip Hop    BOYS

Cheer/Dance    Tumbling    Celtic Step    Adaptive

Would you be interested in a competition dance team: YES or NO

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\*Class preference: (Please Circle)

Weekday (morning)    Weekday (afternoon)    Saturday

I (parent/guardian) hereby declare that I've received a brochure and have read it in its entirety. I understand and agree to abide by all policies set forth by Dance Expressions. I release & hold harmless Dance Expressions, its officers, directors, employees, agents, landlords, lessees from all liability from injury to my person or property. I also intend this release to apply to all future participation in any DE programs/ events including but not limited to recital, all outside performances, competitions etc. I do understand this is a hands on aspect of dance training for technical corrections. Student may decline participation in any activity they feel is harmful and is also responsible to inform the instructor of any physical limitations, which may prevent full participation in class. I also give permission for the use of any photos of my child for the use of advertising, website, brochures etc. and I know that there is no financial compensation for it.

X \_\_\_\_\_ Date: \_\_\_\_\_

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