

Randazzo Dance
Summer Intensive Ballet Program
Beg. Ballet 1 and Ballet 1 & 2
August 15-19, 2011
9am - 3pm

Registration form

Student name _____

Parent/Guardian name _____

Address _____

City _____ State _____ Zip code _____

Home ph# _____ Work ph# _____ Cell ph# _____

E-mail address _____ Student birth date _____

Tuition: \$ 250.00

\$50.00 Deposit due by June 10, 2011 Amt paid: \$ _____ Date paid: _____

Balance of \$ _____ due July1, 2011 Amt paid: \$ _____ Date paid: _____

Indicate payment type: Cash Check (check# _____) CC

(Credit Card payments must be done in person at Randazzo Dance Studio)

Agreement

I/we, _____ the parent(s) or legal guardian(s) of
_____ (the student) have read and understood the Randazzo Dance rules and
agree to abide by these rules and other published policies and regulations. Rules and rule changes will
also be posted on the web-site at www.randazzodance.com and in the studio. I/we recognize the necessity
of physical contact with instructors and student and the risk of illness and injury inherent in any dance
program. I am participating or allowing the student/child to participate upon the express agreement and
understanding that I am hereby waiving and releasing Randazzo Dance, its Directors, employees and
agents from and against all claims, except for illness and injury directly resulting from gross negligence
or willful misconduct on the part of Randazzo Dance, its Directors, employees and agents. As the parent,
legal guardian or student, I hereby grant Randazzo Dance or a designated agent of Randazzo Dance
permission to take photographs or video of me and/or my child participating in dance activities and to
reproduce them for educational, informational and promotional materials.

Date _____

Parent/guardian signature _____

Student signature (if over 18) _____