



Phelps Community Center Dance Program Registration Form

(Please Print)

Child _____ Nickname _____

Last First

Age: _____ Birthdate: ____/____/____ Male _____ Female _____ Height: _____ Weight: _____

Special Needs/Comments

Address:

Street

City

Zip code

Parent/Guardian: _____ H) _____ W) _____ Cell _____

Parent/Guardian: _____ H) _____ W) _____ Cell _____

PRIMARY E-MAIL ADDRESS:

Emergency Contact: _____ H) _____ W) _____

Request for Permission: I, the above referenced Dance Program parent/guardian, hereby register my child to participate in the above listed activity. **Assumption of Risk of Injury:** I acknowledge and understand that there is a risk of injury involved in dance Academy participation. I understand that my child will be under the supervision and direction of a Phelps Community Center. I agree to follow the rules for the sport and the instructions of the coach in order to reduce the risk of injury to my child and other athletes. However, I acknowledge and understand that the coach can't eliminate the risk of injury in sports. Injuries may and do occur. Sports injuries can be severe and in some cases may result in permanent disability or even death. I freely, knowingly, and willfully accept and assume the risk of injury that might occur from my child's participation in the Dance Program. **Release:** In consideration of the Phelps Community Center allowing my child to participate in the Dance Program, I hereby agree to release, waive, discharge, covenant not to sue, hold harmless, and indemnify, on behalf of myself and any other parent or guardian of my child, the Phelps Community Center, and their respective staff, agents, employees, directors, members, officers and other staff members from liability to us and our child, as well as personal representatives, assigns, heirs and next of kin, for any and all claims, suits or causes of action arising from or out of any injury, known or unknown, to property or body, that my child may suffer from participation in the Dance Program, activities, field trips or the above-described Dance Program; and do hereby expressly assume the risk of injury associated with participation in said sports activities. **Photographs:** Photographs will occasionally be taken of the children during the sports activities. By signing this registration form, I consent to the use of pictures of my child for displays, brochures, and promotional materials with no compensation to me or my child. **Parent Initials:** _____

Transportation: Parents are responsible for providing transportation for their child to and from class. **Certification of Child's**

Fitness and Medical Authorization: I, the undersigned, hereby certify that to the best of my knowledge, my child is physically able to safely participate in the sports activity for which he or she has been registered. In addition, I understand that in the case of the illness or injury of my child the Center will try to notify me or the emergency contact listed on this form. In the event of a medical emergency concerning my child at a time when either I or the emergency contact person cannot be notified, I hereby authorize Center officials or my child's coach to obtain the necessary medical care and/or treatment for my child, including, but not limited to first aid, X-ray Examinations, and aesthetic, medical or surgical diagnosis or treatment or hospital care and I hereby accept the sole financial responsibility for such medical care, first aid or Treatment.

Name of insurance company: _____

Insurance Policy Number: _____

If your child has any allergies, asthmatic conditions or any other medical issue the PCC should be aware of. Please list:

IN WITNESS WHEREOF, I have executed this Permission, Waiver/Release and Medical Certification for with full knowledge of its contents on this the

_____/_____, 20____.

Parent/Guardian Signature and Print Parent/Guardian Name

For Office Use Only:

Date Registered: ____/____/____ Registered By: _____ Amount: _____

Phelps Community Center Dance Program Class Prices and options:

Class Fees: See schedule below for 1st class rates

- Additional 30 minute classes are \$15.00 per month per class
- Additional 45 minute classes are \$25.00 per month per class
- PCC Child Care Program families receive a \$5 off discount.

Tuesday	Wednesday
Hip Hop for Tykes Ages 4-6 5:00 – 5:30pm \$25 per month	Creative Movement Ages 2-3 4:30 – 5:00pm \$25 per month
Creative Movement Ages 2-3 5:30 – 6:00pm \$25 per month	Hip Hop for Tykes Ages 4-6 5:00 – 5:30pm \$25 per month
Jazz/Hip Hop Ages 7-11 6:00 – 6:45 \$30 per month	Pre-Ballet/Pre-Tap Ages 4-6 5:30 – 6:15pm \$30 per month
Ballet/Lyrical Ages 7-11 6:45 – 7:30pm \$30 per month	Jazz/Hip Hop Ages 12+ 6:15 – 7:00pm \$30 per month
Tap Ages 7-11 7:30 – 8:00pm \$25 per month	Ballet/Lyrical Ages 12+ 7:00 – 7:45pm \$30 per month
Adult Tap Ages 18+ 8 – 8:30pm \$25 per month	Tap Ages 12+ 7:45 – 8:15pm \$25 per month

Important dates:

- Early Registration – Registration form returned to PCC Main Office on or before August 11th by 8:30pm – \$10 registration fee is waived for early registration
- Regular Registration – Accepted through 9/22/17 in the PCC Main Office - \$10 registration fee for each dancer due at registration.
- Shoe Sizing/Apparel Day September 13th from 6:30-8:00pm in the studio.
- Classes start October 3rd. Late Registrations will not be accepted after November 15th.
- Class fees are due at the 1st of every month.
- January 1st, 2018 – Non-refundable \$25 costume deposit due for each costume
- February 1st, 2018 – \$10 performance fee due for each dancer & will include two complimentary tickets to the year-end recital.
- March 1st, 2018 – Remaining costume balance due.
- May 2018 – Year-End Recital