



Summer Registration Form (June 1-26, 2020)

1808 Woodmoor Dr., Monument, CO 80132
719.232.5313/ jeri@atimetodancecolorado.com

Dancer's Name: _____ D.O.B. _____ Age _____
 Parent/Guardian: _____ Cell# _____ Home# _____
 Dancer Email: _____ Parent Email: _____
 Address: _____
 Contact in case of emergency (other than parent) name and #: _____
 Does dancer have any medical restrictions/allergies: yes/no _____
 Previous Dance Training (type/duration): _____

| Level/Class | In Studio | Zoom | Week 1 | Week 2 | Week 3 | Week 4 |
|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| _____ | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Additional Classes You Will Be Taking: **Please check below.**
A: Worship/Lyrical Variations Jazz/Lyrical Tap Theatre Spa/Hike/Park/Outdoor Dates _____
B & C: Variations Jazz/Lyrical Hip-hop Tap Theatre Spa/Hike/Park/Outdoor Dates _____
D: Jazz/Lyrical Ballet Bootcamp in the Park Hip-hop Tap Theatre Teen Ballet
E: Jazz/Lyrical Storybook Dance Kidz Hop Bal/Tap/Jazz Combo (Tu and/or Fri) Beg. Tap Theatre
Age 7-9 years: Storybook Dance Kidz Hop Bal/Tap/Jazz Combo (Tues and/or Fri) Craft & Choreography
 Beg Tap Theatre Ballet Bootcamp in the park

Adult or Teen Classes: Hip Hop Theatre Beg. Ballet Worship/Lyrical Prof Ballet
 Other information that would assist ATTD in organizing class structure i.e. vacations, intentions, etc _____

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| Professional Rate: 10.00/class Teacher Rate: 8.00/class Drop-in Student: 15.00/hour | Tuition (due and payable upon registering) Levels A-D: \$220.00/month Level E: 100.00/month Age 7-9: 100.00/month 1 hour per week: 60.00/month 2 hours per week: 100.00/month Pro-rating unavailable No additional discounts given Non-Refundable Would you prefer to be billed online <input type="radio"/> ? Or Pay by Check <input type="radio"/> # _____ All classes offered (in your level or below) are included. |
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Release of Liability
 As the legal parent or guardian, I release and hold harmless A Time To Dance, its owners and operators, from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant and/or the undersigned, while in or upon the premises or any premises under the control and supervision of A Time To Dance, its owners and operators, or en route to or from any of said premises.

Medical Emergency
 The undersigned gives permission to A Time To Dance, its owners and operators, to seek medical treatment for the participant in the event they are not able to reach a parent or guardian. I hereby declare any physical/mental problems, restrictions, or condition and/or declare the participant to be in good physical and mental health. I request that our doctor/physician _____ be called at _____ and that my child be transported to _____ hospital. I've read all of the above and the Studio Policies and agree:

 Date ____/____/____
 (Signature of parent or legal guardian if student is under age 18, or signature of student if age 18 or older)