



Sell's Broadway Dance Company
2009-2010
***New Student Registration**



Student Last Name: _____ Student First Name: _____ Age: _____

Parent/Guardian Name: _____ Email Address: _____

Home Phone: _____ Cell Phone: _____ Emergency Contact: _____

Mailing Address: _____

Please list previous dance training:

How did you hear about us?

Sell's Broadway Dance Company

Release Forms:

Liability Release:

I/We _____ (parent/guardian) do hereby release Sell's Broadway Dance Company from liability in regards to any injury to (student name) _____ resulting from any Sell's Broadway Dance Company activities. This includes classes, rehearsals, special events, or any performance.

Signature: _____ Date: _____

Print Name: _____

Media Release:

I/We _____ (parent/guardian) authorize the use of _____ (student's name) picture by Sell's Broadway Dance Company for the purposes of promoting the dance studio. The media may include, but is not limited to, brochures, flyers, website, etc.

Signature: _____ Date: _____

Print Name: _____

Office Use Only:

Paid: _____ Leotard Size: _____ Other information:

Classes Accepted: