



Mid-Valley Dance Company

Student Information

Student First Name _____ Student Last Name _____

Student Address _____

City/State/Zip _____ Home Phone _____

Email Address _____

Student Age _____ Student Birthday _____

Student School _____ Student Grade _____

Please list all dance experience _____

Parent Information

Parent First Name _____ Parent Last Name _____

Parent Address _____

City/State/Zip _____ Home Phone _____

Cell Phone _____ Additional Contact _____

Email Address _____

Emergency Information

Contact Name _____ Phone _____

Doctor _____ Phone _____

Does the student have any special medical concerns? _____

I understand every effort will be made to contact me, the contact person or the doctor. If we cannot be reached, I give my consent for the emergency room physician to treat myself, my child or my family. Signature _____ Date _____

I, the adult applicant or I, the parent or legal guardian of the applicant listed below, hereby give approval of the applicant's participation in any and all Mid- Valley Dance Company programs and activities. I do waive, release, absolve, indemnify and agree to hold harmless the organizers, sponsors, supervisors, participants and persons involved in the operation of Mid- Valley Dance Company programs for any claims arising out of injury or other loss to named applicant or any member of his/her family whether as a participant in the activities or as a spectator. I also give permission for Mid-Valley Dance Company to take photos of me or my child to use for the website and for purposes of promoting the school. . If any child exhibits behavior that is dangerous to herself/himself or to other students, Mid-Valley Dance Company reserves the right to remove the child from the school.

_____ **Adult Applicant or Parent/Guardian Signature** _____ **Date**

I understand that by being accepted into the Mid Valley Dance Company Competition Team I am committing to many hours of rehearsal. I understand the attendance policy and agree to abide by that. I will do my best to attend each rehearsal and competition.

I also agree to follow all policy and guidelines set by Mid-Valley Dance Company. I agree that while wearing clothing affiliated with, or while representing the Mid-Valley Dance Company in the public view, at competitions and various events, I will do my best to represent the Company in a positive manner.

_____ **Student Signature** _____ **Date**

Office Use Only	
App. Rcvd on:	
Registration Fee Rcvd on:	
First Month Pro-Rated Tuition Rcvd on:	