



# 2019-2020 YOUTH DANCE PROGRAM REGISTRATION FORM

Dancer Name \_\_\_\_\_ Gender F M

Age \_\_\_\_\_ Date of Birth (mm/dd/yr) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Parent Name 1 \_\_\_\_\_ 2 \_\_\_\_\_

Phone 1 \_\_\_\_\_ 2 \_\_\_\_\_

Email 1 \_\_\_\_\_ 2 \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

NOTES + PREVIOUS DANCE EXPERIENCE \_\_\_\_\_

### CLASS SELECTION - Placement is at teacher's discretion.

Ballet \_\_\_\_\_ Days \_\_\_\_\_ Ballet 2-5 must enroll in all classes listed.

Contemporary Jazz Days \_\_\_\_\_

Creative Movement Days \_\_\_\_\_

Hip Hop Days \_\_\_\_\_

Young Creatives THU 7:00 to 8:30PM + SAT 2:30 to 4:00PM | Level 4-5 Only

Fall Session  Winter Session  Spring Session **TUITION PER SESSION \$ \_\_\_\_\_**

**Pre-authorized debit/credit cards will be charged on the first day of classes each new session.**

**Prior to start of class, refunds will be given minus 30% of full program tuition.**

**No refunds, exchanges, or credits will be given, for any reason, after the first class.**

**YES**, I would like to donate \$10 to provide a dance class to a deserving youth in our community!

\$10 x \_\_\_\_\_ = \_\_\_\_\_

By signing below, I agree to the following waiver and release. I acknowledge that my child is physically fit and has no health, medical or physical problems that preclude participation in the activities of NW Dance Project. I understand and acknowledge these activities may require special conditioning and skills and involve risk that may include serious bodily injury, permanent disability, death, personal property damage, social or economic loss. I understand these risks may arise from any event(s), whether in or out of my control, and these risks may be unforeseeable or unknown to me at this time. I hold harmless NW Dance Project, its faculty, employees, officers and agents from any liability, actions, cause of action, claims and demands of any and every kind which may arise from or in connection with my child's participation in these activities. By signing below, I, the minor's parent and/or legal guardian, agree that I understand the nature of NW Dance Project's activities and the minor's experience and capabilities and I believe the minor to be qualified to participate in such activities. I have read, understand and comply with the above and permit the minor to participate in the activities.

Young Creatives participants must attend all rehearsals to be considered for performances. By signing below, I agree and intend to have my child present in all classes and rehearsals and to notify the office of any absences.

By signing below, I acknowledge my child has fulfilled vaccine requirements in accordance with Portland Public School policy.

Additionally, by signing below, I grant NW Dance Project permission to take still photographs and/or video of any portion of any class my child may be a part of. These images will be copyrighted to NW Dance Project and can be used by the organization for any marketing or promotional purposes.

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

### NW Dance Project

Mail: PO Box 42488 / Portland OR 97242

Studio: NW Dance Project Creative Center / 211 NE 10<sup>th</sup> Ave / Portland OR 97232  
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NW Dance Project is a registered 501(c)(3) not-for-profit organization