

DAY/TIME:

CLASS:

ABSECON ACADEMY OF PERFORMING ARTS 2018-2019

STUDENT'S NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_ AGE \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

EMAIL (receive newsletters and updates) \_\_\_\_\_

MOTHER/GUARDIAN'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

FATHER/GUARDIAN'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

SCHOOL ATTENDING \_\_\_\_\_ GRADE \_\_\_\_\_

PREVIOUS DANCE TRAINING \_\_\_\_\_

CLASSES INTERESTED IN:

BALLET / POINTE	JAZZ	TAP	HIP HOP	IRISH
LYRICAL JAZZ	CONTEMPORARY	ACTING	JAZZ FUNK	
KINDERDANCE	BOYS CLASSES	ACROBATICS	BARRE/PILATES	

**RELEASE (must be completed for enrollment)**

*The undersigned herewith assumes all responsibility for any injury which may occur to \_\_\_\_\_ while participating in any program or course of instruction offered by the Absecon Academy of Performing Arts, while using the equipment and facilities, and while under the direction of the Absecon Academy of Performing Arts, and hereby releases and discharges the Absecon Academy of Performing Arts, its owners, employees, instructors and agents from any and all claims*

*for damages arising out of the participation in the aforesaid classes or as a result of the aforesaid classes and instruction.*

PARENT/GUARDIAN/STUDENT OVER 18YRS \_\_\_\_\_

DATED \_\_\_\_\_ REGISTRATION FEE \_\_\_\_\_ TUITION \_\_\_\_\_