



2011 Summer Registration Form

Participant Name _____

Age, by date of 1st class _____

Parent/Guardian Name(s) _____

Students completing classes at Waterford in Spring 2011 do not need to fill out this section, unless the info has changed.

Home Address _____

Home Phone _____

Emergency Contact Name _____

Emergency Contact Phone _____

Code #	Class Name	Day & Time Meeting	Weekly Schedule Only: Specify dates child will be ABSENT	Class Fees

All fees must be PAID IN FULL at time of registration.

***Take 5% off your total if taking 2 or more options.
This applies to ALL classes offered.**

Subtotal	\$
5% discount*	-\$
Total Amount Due	\$

*NOTE: Once payment has been received there will be **NO refunds or credits** unless your class is cancelled. If your check is dishonored, a \$30 return fee in addition to the original check amount will be electronically re-presented to your account and by signing below, you acknowledge and authorize this.*

Personal Check: remit to Waterford Dance Academy

Credit Card: Visa / MC / Discover # _____ - _____ - _____ - _____

Exp. Date _____ / _____ Authorized Signature _____

Mail to: Waterford Dance Academy ~ 656 N. Bridgeport Terrace ~ Lindenhurst, IL 60046

or Fax to 847-265-1385 (fax only if paying with credit card)

Questions? Call 847-265-2654

Waiver and Release Agreement

As a participant or as the parent/guardian of a participant in the programs of Waterford Dance Academy, Inc. I recognize and acknowledge there are certain risks of physical injury and I agree to assume the full risk of any injuries, damages or loss which my child/ward or I may sustain as a result of participating in any and all activities connected to or associated with this program. I agree to waive or relinquish all claims from injuries, damages, or loss which I or my child/ward may have arising out of, connected with, or in any way associated with Waterford Dance Academy, Inc. and its staff, agents or officers. I further give permission for myself or my child to be photographed and/or video taped during any class for purposes of promoting Waterford Dance Academy, including the Waterford Dance Academy website (without releasing the child's name). **I have read and understand this waiver and hereby release all claims.**

Parent/Guardian Signature (REQUIRED) _____