



## Registration Form 2010-2011 Season

Student Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
Parent/Guardian Name \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_

Please list all limitations, medical or other conditions that may affect student's performance

\_\_\_\_\_

Previous Dance Training \_\_\_\_\_

Class \_\_\_\_\_ Day/Time \_\_\_\_\_

Class \_\_\_\_\_ Day/Time \_\_\_\_\_

Class \_\_\_\_\_ Day/Time \_\_\_\_\_

Class \_\_\_\_\_ Day/Time \_\_\_\_\_

Tuition Total \_\_\_\_\_ Registration Fee \_\_\_\_\_ Total Payment \_\_\_\_\_

\*First months tuition & registration fee is due at time of registration and is non-refundable

### Liability Disclaimer:

I understand that dance is a physical activity and injuries may occur. I can choose not to participate in activity and I am responsible to notifying the instructor(s) of an injury or disability that may limit full participation in class. I do not hold Eloquence Dance Centre and its instructors responsible for personal injuries occurred during class or performance time.

I understand and agree with the above statements. Parent/Guardian please sign for students under 18.  
Signature \_\_\_\_\_ Date \_\_\_\_\_

I give Eloquence Dance Centre permission to use pictures of my child in all advertising including website, newspaper advertisements and brochures.  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**I understand tuition is due the first of the month September thru June. After the 5<sup>th</sup> day of the month there is a \$10 late fee. All tuition and registration fee(s) are non-refundable.**

**Initial** \_\_\_\_\_

How did you hear about Eloquence Dance Centre?

\_\_\_\_\_ Newspaper advertisement \_\_\_\_\_ Internet  
\_\_\_\_\_ A friend \_\_\_\_\_ Other (please specify) \_\_\_\_\_

Please make checks payable to Eloquence Dance Centre  
Please mail registration fee, form & tuition to:  
Eloquence Dance Centre  
675 Great Road  
Littleton, MA 01460