

## The Dance Haven Summer 2014 Dance Registration Form

	r Student, Include the appropr n, Inc." Mail to 379 Salem Stre	iate fee and make checks payable to et, Medford, MA 02155
	PLEASE PRINT IN INK	
Student Information:		
First Name	Last Name	Middle Initial
Address	City	Zip
Age	Birth Date//	Grade
Summer Classes Registered For		
	o or Intensive Fee:	
Please make checks payable t	e Upon Registration and are No to The Dance Haven, Inc. If yo se email us at info@thedanceh	u would like to pay your fee on-line
Dance Experience If any: Please	list the types of dance and ye	ears, Ex: Ballet, 3 yrs. 2001-2004
Parent/Guardian		
		Phone
Email Address		
		Email
Parent/Guardian		
		Phone
Email Address		
	Work	Email
EMERGENCY CONTACT NAME		
RELATIONSHIP		
EMERGENCY CONTACT PHONE		CELL PHONE
Do you/your child have any me If yes please describe below in	edical/physical disabilities that lim the Medical History.	it participation?
□ No		
activity, which may be personally harmfu may prevent full participation in class. T damage to personal property. I waive a	ul and is also responsible to inform th The Dance Haven and the instructors Il rights for claims against The Dance e I participate in activities. I agree to	pay any costs and penalties should my
Student Signature or Parent/Guar	rdian if Under18	
Printed Name	Da	te
child. The Dance Haven nor its stat	I provide this information to emen ff or instructors does not assume Students or Parents/Guardians a	rgency service personnel caring for your

Serious Diseases:	
Allergies:	
Medications:	
Hospitalizations:	
Additional Information:	