

DanceMaineia Summer 2024 Registration Form

STUDENT INFORMATION - If enrolling multiple students, please use separate registration forms.

Last Name:	First Name:	Age:
PARENT/GUARDIAN INFO	RMATION (or dancer if 18 or older)	
Last Name:	First Name:	
Address:		
City:	State:	Zip:
Phone:	Email:	
Would you like to receive updat	es and alerts via text and/or email? Yes No	
EMERGENCY CONTACT IN	FORMATION	
Last Name:	First Name:	
Phone:	Relationship to Student:	
REGISTRATION		
Class/Camp(s)		
LIABILITY DISCLAIMER		
signs of sickness, he/she will be	ce if he/she has had a fever in the past 48 hours or a sent home. I agree that I will not hold Melanie Pagu s liable for any injuries, illnesses, or loss of personal	rko, DanceMaineia or an of its instructors, the
I have read, understand and ag	ree to the above Liability Disclaimer.	
Parent/Guardian Signature:		Date:
MEDIA RELEASE		
I give permission to DanceMain newspaper articles, and social n	eia to photograph my child for advertising purposes inedia: Yes No	including but not limited to website,
PAYMENT INFORMATION		
	MUST be submitted to secure a dancer's spot for sum . Please make checks payable to DanceMaineia.	mer classes. Acceptable forms of payment
Amount Enclosed: \$		
Submit this form and payment	to: DanceMaineia, 571 Townhouse Rd, Whitefield, N	ME 04353