

DANCE EXPLOSION SUMMER REGISTRATION FORM

INSTRUCTIONS: PLEASE COMPLETE ONE FORM PER STUDENT.

STUDENT'S FULL NAME _____ NICK NAME _____

BIRTHDATE _____ GRADE IN AUGUST 2023 _____ AGE _____

JUNE AM WATERMELON PRINCESS
JUNE PM WATERMELON PRINCESS

JULY AM WATERMELON PRINCESS
JULY PM WATERMELON PRINCESS

JUNE DANCE CAMP (list each class) _____

JULY DANCE CAMP (list each class) _____

CHECK / CASH _____

DATE PAID _____

PARENTS _____

ADDRESS _____ CITY _____ ZIP CODE _____

MOTHER'S CELL # _____ FATHER'S CELL # _____

HOME # _____ WORK # (MOM) _____ WORK # (DAD) _____

EMAIL ADDRESS THAT WE MAY SEND CORRESPONDENCE TO:

EMERGENCY CONTACT NAME & NUMBER _____

CHILD'S PHYSICIAN NAME AND NUMBER _____

PLEASE LIST ANY CONCERNS, ALLERGIES, OR MEDICAL CONDITIONS OF WHICH WE SHOULD BE AWARE: _____