

DANCE INSTITUTE / balletfoundation REGISTRATION - 2010-2011

(please print)

(please check or print)

Dancer's Name	
Address	
City	State ZIP
Home Phone	Cell
Mother's Wk / Cell	Father's Wk / Cell
Parent's Email Address	
Student's email	Birthday / Age Aug 1, 10
Mother's Name	Career
Father's Name	Career

Elem 10-11 / Prof-Prep 10-11 / Adult 10-11 / Sum 10	
Class/Workshop	Day and Time
Class/Workshop	Day and Time
Class/Workshop	Day and Time

AGREEMENT of POLICY, 2010-2011

I have read the Dance Institute of Dallas and balletfoundation Statement of Policy for 2010,2011, understand and am in agreement with the rules, requirements and agreements (both financially and school rules) stated therein.

I will not hold Dance Institute of Dallas, Inc. or the balletfoundation for the XXI Century, it's agents, faculty or volunteers responsible for any accidents incurred whether related to curriculum or not, while at Dance Institute of Dallas studio, during arrival or departure to and from Dance Institute of Dallas or the balletfoundation, or during rehearsals, performances on or off campus of Dance Institute and the balletfoundation for the XXI Century.

Parent's Signature of Agreement of Placement, _____ DATE _____
 Tuition, and Studio Policy, 2010,2011.