2023	
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## TAMALYN'S DANCE CENTRE

Registration Form

Student's Name:										
Mother's Name (if applicable):										
Father's Name (if applicable):										
Name and address to whom mailings are to be sent: Name:										
Street Address:										
City, State, Zip Code:										
Mother's/Student's Work #: Mother's/					Cell #	:				
Emergency #:	Fat	ther's Cell	#:							
Email address (print):										
Class Name	Day Class Name Day									
Martial Arts Youth / Adult (circle)	Fri and S	un	Yoga		W / T	W / Th / S (circle all that apply)				
I do hereby release Tamalyn's Dance Centre; the owners of the premises where the instructional education takes place or any auxiliary staff from any liability in connection with said instructional education classes. I waiver and declare further that I am / my child is in good health and can participate in physical activities, mainly dance education and exercise classes. My physician is aware of my participation in these classes and has given permission for me to participate. Given the nature of any physical education classes, and with the knowledge that injuries sometimes may occur, I have taken the necessary steps to obtain health or hospitalization insurance, which would cover any sustained injuries.										
Signature					Date	/	/			
Student's Date of Birth / /										1
I do hereby give Tamalyn's Dance Centre permissior for the express purpose of advertising, social and pri		es of	myself/ my chil	d as repre	esentativ	es of T	amalyr	n's Dai	nce C	entre
Signature					Date	/	/			
										-
Office use										
Registration (month)			Total Pd			Ck/R	cpt			
Gmail acct Roll										