



MLE After School Dance Program Registration Form

Please fill in the following form. All information entered is private and secure.

Student Name:

Grade:

Teacher:

Parent/Guardian Name:

Phone Number:

E-mail:

STS Yes No

After School Yes No

Other:

Name(s) of person(s) authorized to pick your child up from class:

All of the information provided above is true and accurate, to the best of my knowledge.

I agree to accept responsibility for any medical costs which may result from his / her participation in this program.

I have read this release and understand its meaning. Being fully informed as to the risks associated with participation in this program, I consent to the minor participating in this Program. I understand that my child will perform physical activity. I understand that my child will be photographed.

I understand that when I register for the MLE After School Hip Hop, Salsa or Ballet class, I accept full responsibility to pay all tuition, fees and other associated costs.

Submission of this form implies that I understand that this is a legally binding contract, and I have read it and understand it.

Parent/Guardian Signature:

Date: