

THE DANCE MATRIX
REGISTRATION FORM
2020 DANCE CAMPS

DANCER NAME: _____

PARENT NAME: _____

CAMP(S) REGISTERING FOR:

CAMP #1 - AUGUST 10-14, 2020, 12-5PM DAILY

CAMP #2 - AUGUST 17-21, 2020, 12-5PM DAILY

PROVIDE THE FOLLOWING INFORMATION IF YOU ARE NOT CURRENTLY ONE OF OUR STUDENTS:

DANCER DOB (MONTH/DAY/YEAR): _____

CURRENT ADDRESS: _____

CONTACT PHONE #: _____

EMAIL ADDRESS: _____

PLEASE PROVIDE DETAILS OF ANY PREVIOUS DANCE EXPERIENCE:

IS THERE ANY SPECIFIC MEDICAL INFORMATION THAT WE NEED TO KNOW, IF YES PLEASE DESCRIBE:

On behalf of my dancer(s), I _____, agree to abide by the following:

To notify the studio manager, Helen McDougall, if at anytime, any person in my dancers' family and friends bubble comes into contact with or tests positive for the COVID-19 virus.

(SIGNATURE OF PARENT/GURADIAN) DATE: _____

EACH CAMP COST IS \$250 - \$100 DEPOSIT IS DUE UPON REGISTRATION AND BALANCE IS DUE 5 DAYS PRIOR TO THE FIRST DAY OF CAMP DEPOSIT BECOMES NON-REFUNDABLE 7 DAYS BEFORE CAMP START DATE