

2022/2023 Registration



Student's Name _____ Date of Birth _____
Student's School _____ Grade (fall 2022) _____
Student's siblings enrolled in DCSP _____

PARENT(S) / GUARDIAN(S) INFORMATION

Parent(s) Name _____
Address _____
City/State/Zip _____
Best Phone Number _____
Alternate Phone Number _____
Bill will be sent via Email _____

In case of emergency and I am not available, please contact:

Name _____ Phone Number _____

MEDICAL CONDITIONS/CONCERNS

Please share any information that may help us better serve your child: _____

CLASS REGISTRATION (please use the codes below to complete this section.)

Classes: Ballet/Tap (B/T); Ballet/Tap/Jazz (B/T/J); Hip Hop (HH); Cecchetti (C); Pointe (P); Lyrical (L)

CLASS	DAY	TIME	STUDIO	START DATE	MO.TUITION

Please tell us how you heard of DCSP: _____

I grant permission for my dancer's photo to be used in marketing The Dance Center of Severna Park and the Severna Park Community Center.

Parent or Legal Guardian _____ Date _____

I acknowledge I am financially responsible for all payments of the Monthly Tuition and Additional Fees for The Dance Center of Severna Park. I further acknowledge that I have read, understand, and will follow The Dance Center of Severna Park policies (see reverse) and agree to release and discharge The Dance Center of Severna Park, its employees and agents from responsibility for any injuries sustained or aggravated as a result from participation in The Dance Center of Severna Park activities. By registering online, I am authorizing The Dance Center of Severna Park and The Severna Park Community Center to automatically debit my card each month for payments.

Financially Responsible Party _____ Date _____

OFFICE USE ONLY	Date Received _____	Received by _____	Date Entered _____	Entered by _____					
	Date Changed _____	Changed by _____							
Sept _____	Oct _____	Nov _____	Dec _____	Jan _____	Feb _____	Mar _____	Apr _____	May _____	June _____