

ASOD

2023-2024 REGISTRATION

Please make sure to circle the classes of interest located on the back!!

Student Name: _____ **Age:** _____

Birthday: ___/___/___ **Grade(Aug 2023):** _____ **School:** _____

Primary Contact Name: _____

Address: _____

City: _____ **Zip Code:** _____

Primary Contact Phone Number: (_____) _____

Phone #'s for BAND (free communication app) _____

ANY Medical Issues: _____

Who, if a parent isn't available should be notified in an emergency?

Name: _____ **Phone:** _____

Recital T-Shirt Size (For the student, please double check before circling)

YXS YS YM YL YXL AS AM AL AXL

By signing this application & paying the \$30 Registration Fee, you acknowledge that you are fully aware of the financial obligations both monthly and at recital time, as well as, the necessity for your dancer to attend class weekly, while properly dressed and with a good attitude. You also understand that while there is a rare risk of injury, you agree that the student is covered under an adequate insurance policy and will not hold Armstrong School Of Dance, Inc. officers, staff, owners and faculty liable for any injury or medical bills. We love what we do and do our very best to do so in an active, educational, hands-on way that helps students not just on the dance floor but in the handling of everyday situations with grace and composure. Spots are reserved on a first come, first serve basis, and will be confirmed with BAND invites starting July 2023.

Parent

Student (6th-12th Graders)

DON'T FORGET TO COMPLETE THE OTHER SIDE & INCLUDE YOUR \$30 FEE!!