

FRIDAY FUN NIGHT REGISTRATION FORM

*\*Please print all information clearly.*

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_

Parent/Guardian’s Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Phone Number: ( ) \_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact’s Phone Number: ( ) \_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Please read carefully before signing and dating the following consent.

I give my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_ permission to participate in A Dance Studio’s Friday Fun Night on August 4th from 5:00pm to 10:00pm. I understand that a pizza dinner and a popcorn snack will be provided. If my child has any allergies (food or otherwise) I will provide written information to A Dance Studio listing the specifics of his/her allergies and will approve, in writing, an alternate dinner/snack suggestion. I understand that my child’s picture may be taken for use on A Dance Studio’s approved social media, however, my child’s name will not be used. If my child is going to be picked up by another parent or will be allowed to drive home on his/her own, I will notify A Dance Studio in writing on the back of this form.

Parent/Guardian’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Payment of $30.00 (in the form of cash or check) must accompany this registration form.*