



**REGISTRATION FORM**

Dancer Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_

Grade as of Sept: \_\_\_\_\_ School Hours: \_\_\_\_\_

Parent 1 Name: \_\_\_\_\_ Parent 2 Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**(please note: Center Stage uses email as our primary means of communicating important studio info)**

Physical Limitations: \_\_\_\_\_

Previous Dance Training: \_\_\_\_\_

Referred By: \_\_\_\_\_

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**REGISTER ME FOR THE FOLLOWING CLASS(ES)**

**Class Name**

**Class Day And Time**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

\*\*\*\*\*

**REGISTRATION IS COMPLETE ONLY AFTER 1ST PAYMENT IS RECEIVED AND STUDIO WAIVER IS SIGNED**

**AMOUNT ENCLOSED: \$** \_\_\_\_\_ *(1st Tuition Payment **PLUS** Registration Fee)*

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I hereby release Center Stage Dance Studio LLC from any and all liability and assume the risks of participating in the Center Stage Dance program. By signing, I accept my responsibility in paying tuition, registration fee and costume charges. I further acknowledge that I have read and agree to the Center Stage Dance Studio LLC Policies and Procedures, Tuition Schedule, and Dress Code, all of which are located on our website. By my signature below, I hereby give Center Stage Dance Studio LLC permission to photograph and/or video my child(ren) and consent to the use of material for advertising, marketing and promotional purposes.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**PLEASE MAIL TO:**  
CENTER STAGE DANCE STUDIO LLC  
838 High Ridge Road, Stamford, CT 06905

**OR**

**PLEASE FAX TO:**  
(203)846-8292

**[www.centerstagedancestamford.com](http://www.centerstagedancestamford.com)**