

SOUTH CAROLINA DANCE COMPANY

2011 SUMMER REGISTRATION FORM – REGISTRATION FEE \$25



For office use only/payment

Mail To: SCDC 1332- E North Lake Dr. Lexington, SC 29072
 Attention: Registration Phone: (803) 996-1150 or (803) 960-4091

Student's Name: _____ Age: _____ (at present)

Date of Birth: _____ Parents/Guardian: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Number: _____ Work number: _____

Cell Numbers: _____

Email Addresses: _____

In Case of Emergency, Please Notify: (Someone other than Parents)

Name: _____ Telephone: _____

Are there any medical problems we should know about? _____

If yes, list medications: _____

DANCE years completed: _____ {we honor every studio years of experience} Competition Team years: _____

School Attending: _____ Grade of School: _____

Name/Phone # Person providing Transportation for your child: _____

Are you a new student? _____ If yes, how did you hear about us? _____

{Office Use Only}

No.	Summer Camp Week	Day	Time	Teacher	Tuition
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

COMMENTS:

SOUTH CAROLINA DANCE COMPANY

Disclaimer

Submitting this form means that you accept the following: "I hereby enroll myself or my child for the SUMMER session and agree to follow all payment policies, dress codes, and other rules and regulations as stated in the brochure or website. I understand that all tuition, costume, and recital fee payments are nonrefundable and agree to pay the late fees and the service charge for bad checks. I recognize that attendance and participation may expose me or my child to risk of injury or harm. South Carolina Dance Company teachers and/or staff will not be held responsible should such injury or harm occur. I hereby authorize South Carolina Dance Company to use photographs of the student on the SCDC website and in any publicity materials and/or advertisements."

Parent's Signature: _____ Date: _____

Student's Signature: _____ Date: _____