

**Visa, MasterCard,  
Check, Cash**

# Nor Cal Dance Arts

## Teen Adult Summer Registration

Office Use:  
 Entered: \_\_Y\_\_N  
 Enrolled: \_\_Y\_\_N  
 Student# \_\_\_\_\_

Please do not use this form for YMCA camps, if you would like to register for a YMCA camp please ask the front desk for the YMCA forms.

**Students Name:** First: \_\_\_\_\_ Last \_\_\_\_\_ Birthdate \_\_\_/\_\_\_/\_\_\_ Sex \_\_\_M\_\_\_F Age \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Apt. \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Grade (next fall) \_\_\_\_\_ Ethnicity (Optional) \_\_\_\_\_  
 School/Studio: \_\_\_\_\_ Interested in Performing: \_\_\_Yes\_\_\_No

**Parent/Guardian Name:** \_\_\_\_\_  
 Work #: \_\_\_\_\_ Emergency # \_\_\_\_\_  
 Employer: \_\_\_\_\_  
 Occupation: \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_  
 E-mail: \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_  
 Work #: \_\_\_\_\_ Emergency # \_\_\_\_\_  
 Employer: \_\_\_\_\_  
 Occupation: \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_  
 E-mail: \_\_\_\_\_

### NCDA Release

Dancing is a strenuous activity from which injuries could arise. Nor Cal Dance Arts, staff, and employees are NOT LIABLE for personal injuries, loss of, or damage to personal property. Each student may decline to participate in any activity. Please inform the instructor of any physical limitations you may have. If you are in doubt as to your physical abilities, please consult your physician before participating. Nor Cal Dance Arts can not dispense of aspirin or other medication. In the event of an emergency, Nor Cal Dance Arts is authorized to secure emergency medical treatment which you will be responsible for. NCDA retains the right to use photos and or video in any way they see fit without compensation. The views of Nor Cal Dance Arts may not be the views of all affiliated sponsors. I have read and understand all studio policies. Students left more than 15 minutes pre or post classes will be subject to a \$1 per minute charge. If your child is under the age of 18 you will explain this release to your child.



\_\_\_\_\_  
 Parent/Guardian's Signature

Program/Class	Fee	Payment
<b>The Master Series</b> (16 Classes)	\$240	
<b>The Master Series</b> (8 Classes)	\$145	
<b>The Master Series</b> (Single Class)	\$20	
<b>Teen Adult Ballet</b> (Single Class)	\$10	

**NOW**

**Free Summer Registration  
 No Membership Fees  
 Free Fall Pre-Registration**

**CALL THE STUDIO AT...  
 (408) 923 - 5300**

**VISIT US ONLINE  
 WWW.NORCALDANCE.COM**

**418 & 422 NOR CAPITOL AVE.  
 SAN JOSE CA 95133**

<b>Registration Fee</b>	<b>\$0</b>
<b>Credit</b>	
<b>Total Due</b>	
<b>Total Payment</b>	
<b>Payment Method</b>	

**How did you hear about us?**

Student: \_\_\_\_\_ Website: \_\_\_\_\_  
 Sponsor: \_\_\_\_\_ School: \_\_\_\_\_  
 Other Studio: \_\_\_\_\_ Walk In: \_\_\_\_\_