

SUMMER 2019 REGISTRATION FORM

Marianne Kelley's School of Dance

Student _____ Date of Birth _____
Parent/Guardian _____ Phone _____ Email _____
Address _____ City _____ ZIP _____

Circle the session for each camp you are enrolling and specify time where applicable.

WEEKLY SUMMER CLASSES

Class(es) Name & Time:

DANCE CASTLE CAMP **CIRCLE ONE**
SESSION 1: JUNE 17 - 21 9:30 - 12:00 OR 9:30 - 2:00
SESSION 2: JULY 1 - 5
SESSION 3: JULY 15 - 19
SESSION 4: JULY 29 - AUG 2
SESSION 5: AUGUST 12 - 16

GRAND JETÉ BALLET INTENSIVE
SESSION 1: JUNE 17 - JUNE 21
SESSION 2: JULY 29 - AUGUST 2

CLASS ACT INTENSIVE **CIRCLE ONE**
SESSION 1: JUNE 24 - 28 9:30 - 2:00 OR 9:30-5:15 T/TH
SESSION 2: JULY 1 - 5
SESSION 3: JULY 8 - 12
SESSION 4: JULY 15 - 19
SESSION 5: JULY 22 - 26

ELEMENTS PERFORMANCE CAMP
AUGUST 5-16

REQUIRED WAIVER

- By enrolling my child/children/self at Marianne Kelley's School of Dance, I agree that pictures and video taken may be used for ads, printed material, or video my MKSD.
- I do not hold Marianne Kelley's School of Dance or its employees liable for injuries that may occur during classes, rehearsals, or performances give by Marianne Kelley's School of Dance.
- I give permission for an employee of Marianne Kelley's School of Dance or a parent chaperone to seek medical attention for my child if necessary.

PARENT GUARDIAN SIGNATURE: _____

DATE: _____

Please list any medical conditions in which MKSD should be aware:

Forms may be mailed or dropped off at MKSD with \$20 registration fee. Remaining tuition is due by May 15, 2019. *Payment plans available upon request.*