

MISSION DANCE & PERFORMING ARTS

2018 SUMMER CAMP STUDENT REGISTRATION FORM

Student's Information:

Last Name:_____ First Name:_____ Phone #:(____)_____
Address:_____ City:_____ State:_____ Zip:_____
DOB:___/___/_____ Age:_____ E-mail Address:_____
Years of Dance Experience:_____ Please list any known allergies:_____
Male or Female(Circle)

Parent's Information:

Name:_____ Cell Phone #:(____)_____
Emergency Contact:_____ Emergency Phone #:(____)_____

Tee Shirt Size - (circle one)

Youth Small
Youth Medium
Youth Large
Adult Small
Other:_____

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Please Check the Following:

Camp #1: July 16-20 _____

Camp #2: July 30-Aug 3 _____

Camp #3: Aug 13-17 _____

9 A.M. Early Drop Off (\$5/day):

M	T	W	TH	F
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Paid By:

Check #_____ Credit_____ Cash_____

Mission Dance & Performing Arts, hereinafter referred to as MDPA, shall not be held responsible or liable by any student or parent or guest of any student or parent for bodily injury or damage or loss of property for any reason. The undersigned is familiar with the risks and perils inherent with sports activities which are conducted at MDPA. The undersigned releases MDPA of any and all liability from personal injury to himself/herself and his/her child(ren) as student(s) of MDPA, the undersigned hereby voluntarily assumes all responsibility on behalf of himself/herself and his/her child(ren) and guests, for all personal injuries, property damage and/or any other damages resulting from or in any way associated with the entry upon MDPA's operating premises and/or participation in any of the activities sponsored by MDPA. Further, the undersigned releases MDPA and its officers, agents, and employees from all claims, liabilities, and demands of any kind.

Parent's Signature:_____ Date:_____