



50 Leominster Road, Sterling, MA 01564 (978) 422-6989

E-mail: office@paulameoladance.com; Website: www.paulameoladance.com

Summer in The Studio

Tuesday & Thursday Evenings

5:00 p.m. – 7:30 p.m.

Two classes per evening. Daily ballet classes and a contemporary, modern, jazz, lyrical or Pilates class. Suggested for dancers in Junior II through Level VII and Teen.

Full payment is due at the time of registration. Registration forms must be received by June 10th, 2017. Dancers must register for the full week. Summer tuition is nonrefundable and cannot be transferred to other camps, classes, or fall tuition. Spaces will not be reserved without a completed registration form and full payment. Any classes missed may be made up during our regular season as available. Please note summer classes are mixed levels. Minimum enrollment must be met for each week.

- Week I:** July 11th & 13th
- Week II:** July 18th & 20th
- Week III:** August 22nd & 24th

Tuition: \$75.00 per week

Student Name: _____ Birthdate: _____ Age: _____

Guardian/ Parent: _____

Address: _____ Town: _____ Zip Code: _____

Email: _____

Phone: Home: _____ Work: _____ Cell: _____

Current/Previous Dance Experience: _____

How did you hear about PMD's Summer Programs? _____

STUDIO USE ONLY

Date Received: _____ Cash/Check #/Credit: _____ Amount Paid: _____ Balance Due: _____

EMERGENCY CONTACT & PHOTO RELEASE

Student Name _____

Please list any medical or developmental issues that would affect your child's participation in class at PMD

May the office staff give my child Tylenol or Advil if requested? Yes _____ **No** _____ **Dosage** _____

Emergency contacts (other than parents/guardian)

1) Name _____ **Relationship** _____ **Phone** _____

2) Name _____ **Relationship** _____ **Phone** _____

Photo Release - Paula Meola Dance & Performing Arts occasionally takes pictures and videos of students during classes, rehearsals, and performances. These pictures may be used on our websites, social media sites and in publications. If published, PMD will not identify student's names or addresses unless a student is to be recognized for a particular reason.

Injuries/Waiver of Liability/Authorization for Parent or Guardian of Students - I understand that there is a risk of personal injury with rehearsals, practice and performances. I declare that my child listed above is in good health and physically capable of participating in classes, rehearsals and performances. I hereby waive and release any claim against Paula Meola Dance & Performing Arts, Inc. and its directors, officers, staff, employees, landlord, and contractors arising out of injury to my child occurring in connection with classes, rehearsals or performances, or otherwise occurring in or around the studio or other location of classes, performances, or rehearsals. I accept responsibility for obtaining appropriate accident, health, and hospitalization insurance to cover my child in the event of personal injury. In the event of an injury or other medical emergency, I hereby authorize representatives of Paula Meola Dance & Performing Arts, Inc. to seek any medical assistance reasonably required in their judgment and I agree to be responsible for the resulting medical & expenses.

Registrations are not complete without this signed form.

Parent/Guardian _____ **Date** _____