



50 Leominster Road, Sterling, MA 01564 (978) 422-6989  
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# Mini Dance Camps

Camp Director: Amanda Stevens

*For student's ages 4 to 7 years, no dance experience required.  
Fun themed dance games, crafts, and more! Juice box and healthy snacks provided!  
Fridays are "Bring a Buddy Day!"- Free camp day for your best "buddy."*



**Monday through Friday 9:00 a.m. - 11:30 a.m.**

- Mermaid Kisses & Starfish Wishes*
- Super Hero Girls*

**July 8<sup>th</sup> – 12<sup>th</sup>  
August 12<sup>th</sup> – 16<sup>th</sup>**



**Tuition:** \$125.00 per camp

**Full payment is due at the time of registration. Registration forms must be received by June 1<sup>st</sup>, 2019.**  
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.

Student Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_

**NEW STUDENTS ONLY**

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: \_\_\_\_\_

NEW STUDENTS ONLY

**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 \_\_\_\_\_**