

Broadway Bound Dance Center Summer Dance Registration Form

Student's Name:		
Date of Birth:	Age:	Current BBDC Level:
Address:		
City:	State:	Zip:
Parent #1:	Phone (H):	(C/W):
Parent #2:	Phone (H):	(C/W):
Emergency Contact:	Relation:	
Emergency Phone Number:	Any medical conditions we should be aware of:	

Advanced Dance Classes

_____ Wednesday, July 21 @ 5:00-7:00 pm – Tap & Acro	\$45
_____ Wednesday, July 28 @ 5:00-7:00 pm – Jazz & Hip Hop	\$45
_____ Wednesday, August 4 @ 5:00-7:00 pm – Contemporary & Ballet	\$45
_____ Wednesday, August 11 @ 5:00-7:00 pm – Lyrical & Jazz	\$45
_____ All 4 Weeks	\$128
Total: _____	

Team & Core August Intensives

_____ Week 1: August 16-19 (Mon-Thurs) 10:00am-3:30pm	\$350
_____ Week 2: August 23-26 (Mon-Thurs) 10:00am-3:30pm	\$350
_____ Both Weeks	\$600
Total: _____	

1/2 Day Dance Camps (ages 3-6)

_____ Week 1: Disney Prince & Princesses June 21-24 (Mon-Thurs) 9:00am-12:00pm	\$185
_____ Week 2: Beach Babies August 9-12 (Mon-Thurs) 9:00am-12:00pm	\$185
_____ Week 3: Moana August 16-19 (Mon-Thurs) 9:00am-12:00pm	\$185
Total: _____	

Total Amount Due: _____

Payment Options: Check, Credit Card or Venmo (@BBDCNatick)
 ** Payment in full due with registration form **
 Email us at bdbcnatick@yahoo.com with questions

I, the undersigned Parent or Guardian of the above student, release **BROADWAY BOUND DANCE CENTER**, including instructors and assistants, from any and all injuries which may occur from training, practicing, performing and/or during any event or activity. I also agree that I am responsible for the health and accident insurance and any medical costs for the above student incurred due to injury including, but not limited to, emergency medical transportation and treatment if the need arises. I understand that BBDC has a NO REFUND policy. If a student drops, the account will be credited the remaining balance and will be saved for up to one year. I also give my permission for the public display of any studio pictures that my child may be in.

Print Name: _____ Signature: _____ Date: _____