The Dance Studio of Park Slope - Summer Dance Camp Registration

If registering I	multiple students please complet	te additional form	ns.		
☐ New Student	How did you hear about us?				
Student's First Name Last Last					
Date of Birth	School			Grade	
Parent Name(s)	Phone Contact #				
Address		City	State	Zip	
Medical Condition	ons Daytime Caregiver				
Email Address (please print clearly) Confirmation of class enrollment and payment will be sent via email.					
Eight student minimum required to constitute camp No refunds / credits Children and Adult classes are non-transferable Returned check fee is \$25 Schedule is subject to change and/or cancellation without		-	Payment details: Tuition is required on or before June 15 th Check, cash, credit card payment accepted		
Summer Dance Camp Tuition for 1 week of Summer Dance Camp - \$525.00					
Please check Summer Dance Camp Week and indicate age group.					
July August					
	Week of July 5 th - 9 th		Week of August 2nd	^d - 6 th	
	Week of July 12th - 16th		Week of August 9th	- 13 th	
	Week of July 19th - 23rd		Week of August 16	oth - 20 th	
	Week of July 26th - 30th		Week of August 23	8 rd - 27 th	
Number of Summer Dance Camp Weeks X \$525.00 Tuition Total \$ Tuition is required on or before June 15 th - Check, cash, credit card payment accepted I give permission for my child to participate in classes at The Dance Studio of Park Slope and I release The Dance Studio and all employees from any liability connected with any activity connected to dance class and performance. I authorize The Dance Studio of Park Slope to photograph or film my child at any Studio activity for use in The Dance Studio activity for use in The Dance					
Studio's promotional efforts. If at any time NYS or NYC change Business Restrictions or Guidelines to prohibit group, in person classes - instruction will continue virtually via Zoom. I acknowledge the contagious nature of the COVID-19 virus, and respect that The Dance Studio of Park Slope adheres to the CDC recommendations of practicing social distancing and wearing face coverings and has put in place preventative measures to reduce the spread of the COVID-19 virus, to the best of their abilities. I acknowledge that there is an increased risk of exposure to COVID-19 by participating. I acknowledge that I must comply with all set procedures to reduce the spread while in attendance. I understand and agree to all tuition and terms stated above.					

Parent / Guardian *Signature is required for students to participate in class.

Mail to or drop off form and payment: