

# CEDAR PARK DANCE COMPANY

300 BRUSHY CREEK ROAD STE# 501  
CEDAR PARK, TX 78613  
512.257.9722  
cedarparkdanceco@yahoo.com

STUDENT FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_ AGE: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ NUMBER: \_\_\_\_\_

PAST DANCE EXPERIENCE: \_\_\_\_\_

## Liability Agreement & Emergency Medical Release

Please initial the following:

\_\_\_\_\_ Cedar Park Dance Company is not liable for any items left or lost at the studio. There is a lost and found located next to the office and any items found in the studio will be placed in the lost and found.

\_\_\_\_\_ Please agree and understand that there is potential for injury with participation in any sport, including classes at Cedar Park Dance Company. Cedar Park Dance Company owners and staff will make every reasonable effort to eliminate injury, please understand these risks and agree to hold CPDC harmless from any and all liability associated with the injury that a student may incur while on the property of CPDC.

\_\_\_\_\_ I, \_\_\_\_\_, Guardian of \_\_\_\_\_ hereby give my consent to Cedar Park Dance Co., to arrange for medical, surgical and/or dental care treatment necessary to preserve the health of my child.

\_\_\_\_\_ I understand that a 30 day notice is required in order to withdraw from a class at Cedar Park Dance Co. If notice is less than 30 days, I understand I am still responsible for the next months tuition.

\_\_\_\_\_ I know that tuition is due by the 10th of each month and that if paid after the 10<sup>th</sup> a \$10 late fee will be added to my account

\_\_\_\_\_ I allow photos of my dancer to be used in studio advertisement or promotions.  
(Names will never be used)

## SUMMER CAMPS & INTENSIVES

- Tutus & Tiaras 6/14-18, 9-1pm (3-5yr)       Fairytale Wonderland 7/26-30th, 9-1pm (3-5yr)  
 Broadway Baby 6/21-6/25, 9-1pm (3-5yr)       OKLA Dance Intensive 8/2-8/4  
 Pop Star Diva 7/12-7/16th, 9-1pm (6-8yr)

FOR OFFICE USE ONLY

TOTAL # OF CLASSES: \_\_\_\_\_

TUITION AMOUNT: \_\_\_\_\_ PRORATED AMT.: \_\_\_\_\_ (# OF WEEKS \_\_\_\_\_)

REGISTRATION FEE: \_\_\_\_\_

PMT AMT. \_\_\_\_\_ PMT TYPE \_\_\_\_\_ DATE: \_\_\_\_\_ EMP. INT. \_\_\_\_\_

CHECK WHEN ENTERED:

MASTER ROLL       TEACHER ROLL       QUICKBOOKS

SUMMER 2010