

**Registration & Waiver 2018/2019 Season, Winter/Spring**

Student Name	
Student Age/Birth Date	
<p>Kinderdance (ages 3 &amp; 4), <input type="radio"/> Tuesdays, 4:45 pm – 5:30 pm (.75) or <input type="radio"/> Thursdays, 3:30 pm – 4:15 pm, \$230</p> <p><input type="radio"/> Ballet I (ages 5 &amp; 6), Wednesdays, 4:30 pm – 5:15 pm (.75), \$230</p> <p><input type="radio"/> Ballet II with Tap (ages 7+), Thursdays, 4:30 pm – 5:30 pm (1.0), \$306</p> <p><input type="radio"/> Ballet III with Tap (ages 9+), Mondays, 3:00 pm – 4:00 pm (1.0) \$306</p> <p><input type="radio"/> Ballet IV (ages 11+), Mondays, 4:00 pm – 5:30 pm (1.5), \$459</p> <p><input type="radio"/> Ballet V with Tap (ages 11+), Tuesdays, 4:45 pm – 6:00 pm (1.25), \$383</p> <p><input type="radio"/> Ballet V with Pointe (ages 11+), Wednesdays, 5:45 pm – 6:45 pm (1.25), \$383</p> <p><input type="radio"/> Adult Dance, Tuesdays, 10:30 am – 11:30 am (1.0), \$144 per 8 week session</p> <p><b><i>Please make checks payable to Carolyn Stine McLaughlin</i></b></p>	
Parent/Guardian Name(s)	[n/a for Adult Dance]
Contact Phone Number(s)	
Email Address	
Mailing Address with Zip Code	
Are there any concerns the student has that the teacher should know about, i.e. allergies, developmental? <input type="radio"/> No <input type="radio"/> Yes If yes, please explain.	

I agree that neither **CAROLYN STINE MCLAUGHLIN OR MOVEMENT ARTS ATLANTA (MAA)** nor any of its employees, independent contractors, directors and/or officers will be held liable for any injury which may occur to my child while attending programming. I hereby release Carolyn Stine McLaughlin, MAA and their respective employees, independent contractors, directors and/or officers from any and all legal or financial claims. Also, I agree that images taken of my child during MAA programming can be used to document and promote MAA.

\_\_\_\_\_ Date \_\_\_\_\_  
 Parent or Legal Guardian (Signature)

\_\_\_\_\_  
 Parent or Legal Guardian (Print Name)