

MDT&S

Minnesota Dance Theatre & School

528 Hennepin Avenue, 6th Floor | Minneapolis, MN 55403 | 612-338-0627
school@mndance.org | www.mndance.org

CAN Dance Summer Program 2019

Registration Information

Please return to MDT&S by **Friday, July 5th 2019**

STUDENT INFORMATION

First name: _____ Last name: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Birthday: ___/___/___ Age: ___ Student Height: _____ Street shoe size: _____

Academic School: _____ Grade completed 2018/2019: _____

Does this student have any medical conditions/allergies/needs we should be aware of? _____

PARENT/GUARDIAN INFORMATION

Parent/Guardian #1: _____ #2 _____

Address #1: _____

Address #2 (if different): _____

Home Phone #1: _____ #2 _____

Cell Phone #1: _____ #2 _____

Email #1: _____

Email #2: _____

FAMILY COMMITMENT

If my student participates in the CAN Dance Program 2019, I understand:

(Please check for "yes")

____ Participation in the full 2-week program is required

____ I/We will be responsible for ensuring punctual drop-off and pick-up of my student at the designated transportation location and/or MDT Studios during the 2-week program

By signing, you acknowledge your understanding of the above information and confirm the information provided is accurate.

Parent/Guardian's signature _____ Date _____

RELEASE AND INDEMNIFICATION FORM

Parent/Guardian agree to the following:

Minnesota Dance Theatre & School (MDT&S) and its employees are not liable for injuries sustained or illnesses contracted by the student while participating in MDT&S activities. In the event that MDT&S has the student's participation recorded on film or videotape or photographed for presentation on television, in printed material, social media or elsewhere, I hereby express consent to use by MDT&S without limit to the time or the number of repeat showings or usages of any part of or all programs in which the student participated.

Student's Name: _____
(Please print)

Parent/Guardian's Name: _____
(Please print)

Parent/Guardian's Signature: _____ Date: _____