

Alabama Dance Academy

3221 OLD COLUMBIANA ROAD, HOOVER, AL 35226 - 205-978-6830
alabamadance@bellsouth.net

Registration Form 2021-22 Season

Student's Name: _____ Birthdate: _____

Parent/Guardian: _____

Mailing Address: _____

City, State, Zip: _____

Cell Phone: _____ Cell Phone Provider: _____

Home Phone: _____ Work Phone: _____

E-Mail Address (For ADA communications only and will not be shared. Please print carefully):

Emergency Contact (Name/Phone): _____

CLASSES ENROLLING IN (please list alternate choices, if any, on back of this form):

Class Title	Day of Class	Time of Class

I understand that neither the Alabama Dance Academy nor any of its instructors will be responsible for any accident or injury incurred on the premises. It is advised that all dance students be covered by their own family insurance policies, as this is your only source of reimbursement. I agree to assume all risks and responsibilities in regard to illness and/or injury associated with any activity associated with the ADA. I give permission for Alabama Dance Academy to use photographs of my child in Alabama Dance Academy related activities on the ADA website. I understand that no child will be identified by name on the website.

I have read, understand, and agree to the policies stated in the Alabama Dance Academy Policy and Information Sheet.

Signature of Responsible Parent/Guardian

Date

Driver's License Number