



FALL Registration Form 2019-2020

Please fill out, mail or e-mail to: planetdance@comcast.net
210 Stedman St, Unit 1, Lowell, Ma 01851 978-458-5502

Student's Name: _____ Date: _____

Age: _____ D.O.B: _____ Grade in Sept, 2019: _____

Parent or Guardian Name: _____

E-Mail: (Necessary) _____

Emergency Phone Number: _____

List any medical conditions or allergies that we should be aware of:

_____ List previous dance experience, (if any):

\$25.00 REGISTRATION FEE (\$35 per family)
Must be paid to reserve class placement for each student

Please specify on back which class/classes student would like to take.

LIABILITY DISCLAIMER

Planet Dance and the instructors are not liable for personal injuries, loss or damage to personal properties. Each student may decline to participate in any activity. Please inform your instructor of any physical limitations, which may prevent full participation in class.

Parent Signature: _____ Pymt: _____

**Fall Classes start the week of September 9th, 2019*



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