

How did you hear about us?

GROSSI DANCE & PERFORMING ARTS ACADEMY REGISTRATION

30 Lafayette Square - Suite 116 Vernon, CT 06066
860-872-1498
www.grossidance.com
grossidanceacademy@gmail.com

PLEASE PRINT

Student Name _____ Birthdate _____

Parent Names (for registrant under 21) _____

Address _____

_____ Zip _____

Parent Cell _____ (Home) _____

Email Address _____

Student email _____ Student Cell _____

Emergency Contact _____

Relationship _____ Phone _____

Medical Information allergies- environment/food/medication, medications currently being taken, pre-existing conditions:

STUDIO USE ONLY: Class Name/Day/Time

Registration Fee \$30/New Student \$25/Returning Student _____ Payment Method Preference (M/S/Y) _____

Monthly Tuition _____ Costume Deposit(s) \$50/Per Class _____

Dress Rehearsal Ins Fee \$45 _____ Total PD at REG _____

I was given, and understand the information as stated in the registrant notice and will adhere to the protocol and procedures of Grossi Dance & Performing Arts Academy (GD&PAA), and acknowledge the GD&PAA shall not be held liable for any accident which may occur to the student or observer during class or upon entering or exiting premises, or during any performances outside of studio properties. Any pictures or videos taken become the property of GD&PAA, and may be used for advertising and marketing purposes.

Signature _____ Date _____

Registrant/Parent/Guardian