



Student Registration

Please complete and mail along with 1st months tuition, parent signature and \$15 Individual (\$20 Family max) Registration Fee to:

**Wilmington Dance Academy
335 Main St, Unit 5, Wilmington, MA 01887**

Family Information

Parent/Guardian: _____ Home Phone: _____
 Address: _____ Cell Phone: _____
 Email: _____ How did you hear about us? _____
 Secondary Name & Contact: _____

***Schedule contingent upon enrollment.**

Student does hereby acknowledge that dance is a physical activity wherein injuries may occur. Wilmington Dance Academy and the instructors are not liable for personal injuries or loss of or damage to personal property that occurs on the premises. WDA has permission to use photos of my child for internet publicity or advertising purposes.

Signature of Parent/Guardian

Dancer Information

Student #1: _____

Date of Birth: _____ Grade: _____

Health Conditions: _____

Previous Years of Dance Training: _____

Where (School): _____

Class Description	Day	Time
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Student #2: _____

Date of Birth: _____ Grade: _____

Health Conditions: _____

Previous Years of Dance Training: _____

Where (School): _____

Class Description	Day	Time
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

ALL Baby & Young Dancer Classes please provide a 2nd OPTION of the class you are registering for. We will inform you if your first choice is not available.

PERFORMANCE TEAM

If you are interested in learning more about our competitive dance program please speak to Laura Osgood.