



DANCE TEAM REGISTRATION

Registration is due at Signup: Total Cost is \$60.00

Dancer's Name: _____ Age: _____ Grade: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian: _____

Phone Number: _____ E-Mail Address: _____

Emergency Contact Name and Number: _____

Dancers: Shirt Size: _____ Pant Size: _____ Shoe Size: _____

Does Your Dancer Have Any Medical Issues, Emotional Challenges, or Physical Limitations We Should Know About? Yes No If Yes, Please List: _____

If you are in need of financial assistance, please let a Park and Recreation employee know at the time of signing up.

Please Read and Sign Below:

I hereby authorize directors, coaches and associates of Mineral County Park and Recreation to provide dance instruction to my child. I know of no mental or physical problems which affect my child's ability to safely participate in the program. Undersigned hereby voluntarily and forever releases, holds harmless, discharges, waives and relinquishes any and all actions, causes of action, or claims for personal injury or wrongful death occurring to his/her child, against Mineral County and any of the volunteers, arising out of his/her use of equipment, facilities or instruction during the season. I hereby authorize directors, coaches, and associates of the Mineral County

Park and Recreation Department to act on my behalf according to their best judgment in any emergency requiring medical attention.

I HAVE READ AND AGREE TO THE TERMS FOUND HEREIN AND ATTACH MY SIGNATURE BELOW

Parent/Legal Guardian (Print): _____

Parent/Legal Guardian (Sign): _____

Name of Dancer: _____

Date: _____

----- OFFICAL USE ONLY -----

Date Received: _____

Paid: Cash Online – Credit Card Check

Check Number: _____ Receipt Number: _____