

FAMILY INFORMATION:

(PLEASE PRINT)

Last Name: _____ **BOTH** Parent's Names: _____

*Address: _____ City: _____ State: _____ Zip _____

*IS THIS A NEW ADDRESS? YES OR NO (PLEASE CIRCLE ONE)

Home Phone # (____) _____ Work Phone # (____) _____ Cell# _____

Place of Employment: Father: _____ Mother: _____

E-mail Address (Required if available): _____

Names & ages of other children: _____

Emergency Name and Phone #: _____ (____) _____

NOT LIVING AT SAME RESIDENCE Inc. area code

Referred by: ___ News Ad ___ Yellow Pages ___ *Friend ___ Other ___ Sign

*Who may we thank for referring you? Name: _____ Address: _____

STUDENT #1 INFORMATION:

(PLEASE PRINT)

Last Name: _____ First Name (& M.I.): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone # (____) _____ Birth date _____ Age _____ Grade _____ male/female

Include area code

Any Health condition we should be aware of? Yes/No. If "YES" explain: _____

Dance experience and Teachers (other than OCD) _____

STUDENT #2 INFORMATION:

Last Name: _____ First Name (& M.I.): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone # (____) _____ Birth date _____ Age _____ Grade _____ male/female

Include area code

Any Health condition we should be aware of? Yes/No. If "YES" explain: _____

Dance experience and Teachers (other than OCD) _____

STUDENT #3 INFORMATION:

Last Name: _____ First Name (& M.I.): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone # (____) _____ Birth date _____ Age _____ Grade _____ male/female

Include area code

Any Health condition we should be aware of? Yes/No. If "YES" explain: _____

Dance experience and Teachers (other than OCD) _____

I give permission for the student(s) named above to receive instruction at Oxford Center for Dance, Inc. I give permission for any photos and/or videos taken of my child/children named above to be published in any Oxford Center for Dance, Inc. advertising, promotions, websites, yearbooks, etc. I have received a copy of the rules and regulations. I have read and agree to abide by all of them. I release and discharge the sponsoring organization, Oxford Center for Dance, Inc., it's agents, servants, and employees from any and all claims for personal injuries or property damage sustained by the student(s) named above while in or around the present studio location as well as during off premises activities such as, but not limited to yearly competitions, meets, conventions and seminars.

Parent or Guardian's Signature _____ Date _____ .

