

2024-2025 REGISTRATION FORM

Please send in the **COMPLETED REGISTRATION** form below with **FULL PAYMENT FOR THE SUMMER CAMP DEADLINE FOR REGISTRATION IS JUNE 10TH**.....

You will receive a confirmation when your registration and payment is received.

Full Refunds will be given if camp is cancelled due to registration.

A picture of your child along with the signed liability form is required with your registration or it will not be accepted.

Student's Name: _____ Student's Address: _____

Student's email: _____

Student's Cell #: _____

Mother's Name: _____

Mother's email: _____

Mother's Cell # *and Carrier*: _____

Father's Name: _____ *Swiftie Summer Camp* _____

Father's email: _____ 4 DAY CAMP () _____

Father's Cell # *and Carrier*: _____ 5 DAY CAMP () _____

Age as of September 2024 _____ Birthdate _____ Amount Enclosed \$ _____

School/Grade in Fall _____ Please make checks payable to: ***Jane Lopoten School of Dance***

LIST MEDICAL CONDITIONS & ALLERGIES ON REVERSE SIDE.