



REGISTRATION FORMS
Summer 2023

Please check the program and all weeks you are registering your dancer for:

- débuter intensive (\$200/week)
 - week 1 (Monday, July 24 - Thursday, July 27)
 - week 2 (Monday, July 31 - Thursday, August 3)

- allongé intensive (\$450/week)
 - week 1 (Monday, July 24 - Thursday, July 27)
 - week 2 (Monday, July 31 - Thursday, August 3)

- voler intensive (\$700/week)
 - week 1 (Monday, August 7 - Friday, August 11)
 - week 2 (Monday, August 14 - Friday, August 18)

Student Name _____

Gender _____ Pronouns _____ Date of Birth _____ Age _____ Grade in fall _____

Home Address _____ City _____ State _____ Zip _____

Parent/Guardian 1 Name _____ Relation to student _____

Parent/Guardian 2 Name (if applicable) _____ Relation to student _____

Parent 1 Cell Phone _____ Parent 2 Cell Phone _____

Parent 1 Email _____ Parent 2 Email _____

Please confirm the following:

I have read the parent resource page on the website (password developpe):

Yes. I have read the parent resource page.

I have completed the following forms:

Student Health Form

Waiver

Photo/Video Release Form

I will pay the following registration fee and deposit to hold my student's space at développé evolving dance education for Summer 2023:

Registration Fee \$50

Deposit due June 1, 2023

débuter intensive-\$50

allongé intensive- \$125

voler intensive- \$175

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date _____



STUDENT HEALTH FORM
Summer 2023

Program: débuter intensive allongé intensive voler intensive

Student Name: _____ DOB: _____

Gender _____ Pronouns _____ Date of Birth _____ Age _____ Current Grade _____

Home Address _____ City _____ State _____ Zip _____

Emergency Contact 1:

Name: _____

Phone Number: _____

Relation to student: _____

Emergency Contact 2:

Name: _____

Phone Number: _____

Relation to student: _____

All questions are to better assist développé educators in the health, wellness, and growth of your dancer. No dancer will be denied program acceptance based on the following information.

Medications?

Allergies?

Past or current injuries?

Past or current diagnosis or concerns about eating disorders or body image?

Other underlying health conditions or concerns?

Is your dancer fully vaccinated for COVID-19? YES NO

Is there anything else regarding your dancer's mental or physical health développé educators should know in order to best assist your dancer in their time studying at développé?

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date _____



MINOR (CHILD) PHOTO/VIDEO RELEASE FORM

Summer 2023

Student Name: _____ DOB: _____

I, _____, the parent or legal guardian of _____ [Child] grant d  velopp   evolving dance education my permission to use any photographs or videos taken while participating in conjunction with the school for any legal use, including but not limited to: publicity, copyright purposes, illustration, advertising, and web content.

Furthermore, I understand that no royalty, fee, or other compensation shall become payable to me by reason of such use.

Parent/Guardian Name: _____ Phone: _____

Parent/Guardian Signature: _____ Date _____



SUMMER AUDITION FORM

Auditioning for: d  buter intensive allong   intensive voler intensive

Student Name _____

Gender _____ Pronouns _____ Date of Birth _____ Age _____ Current Grade _____

Home Address _____ City _____ State _____ Zip _____

Parent/Guardian Name _____ Relation to student _____

Parent Cell Phone _____ Parent 1 Email _____

How many years have you been dancing? _____ Hours per week? _____ Years en pointe? _____

Where have you most recently studied dance?

Any current or previous injuries? (If previous, please provide the date of the injury and whether it has had any long-term effects on your physicality).

How did you hear about d  velopp   evolving dance education?

FOR OFFICE USE ONLY

Notes: