

DEADLINE TO REGISTER IS
MAY 25th!!

DENTON DANCE CONSERVATORY
2018 Summer DANCEcamp Registration Form
"Hip Hop Ninja Camp" (Ages 6-9)



Student Name First _____ Last _____

Address _____

City _____ State _____ Zip _____

Student Age/DOB: _____ "How did you hear about us?" _____

Home Phone _____ Wk Phone _____

Guardian 1 Name _____ Cell Phone _____

Guardian 2 Name _____ Cell Phone _____

Dance Experience _____ # of years _____ Where? _____

E-mail address (please print) _____

Grade _____ School _____

*Please CIRCLE HERE if you registered/paid online at
www.DentonDance.com*

Hip Hop Ninja DANCEcamp:

Ages 6-9, 12-2:30pm June 18-21 FOUR DAY CAMP ___\$135

REGISTER/PAY BY MAY 15TH & RECEIVE A FREE DANCECAMP T-SHIRT!

ORDER TSHIRT HERE: (\$15 AFTER MAY 15TH) CIRCLE ONE: Youth 6-8 10-12 14-16 CXL

We may have a few extras, but if you register AFTER the deadline, there are no guarantees that supplies will last.

Hip Hop Ninja DANCEcamp Daily Schedule

12-12:10, Welcome/Introductions 12:10-12:25, Yoga/Meditation/Brain Gym (to help us focus ☺)
12:25-12:55, Ninja Moves/Games 12:55-1:15, Snack/Video 1:15-1:45, Craft Project
1:45-2:30, Hip Hop

What to Wear?

Please have your ninja wear clothes that are EASY TO MOVE IN (i.e. regular dance attire, gym pants, T-shirt, leggings, sweats, NO BARE TUMMIES AND NO SHORTS PLEASE) Our ninjas should also have CLEAN tennis shoes/socks (we can't have mud/rocks on the dance floors). If the dancer's hair is long, make sure to secure in a ponytail away from face. ☺

End of Camp Performance

Parents, Grandparents, or friends are invited to attend our showing at the end of the camp from 2:15-2:30 (June 21ST)! **All dancers are invited to wear their own costumes.** This helps our dancers feel the excitement of an audience and get used to receiving applause, etc. Cameras are always welcome!

Medical Info:

Allergies _____ Previous Injuries: _____

Is the child taking any medications that may affect his/her participation? _____

In the event that I cannot be reached, please call the following in case of emergency:

Name: _____ Relationship: _____ Ph#: _____

Doctor's Name: _____ Phone _____

Waiver of Liability & Release

I agree to participate in the Denton Dance Conservatory LLC DANCEcamp program as follows:

1. I understand that Denton Dance Conservatory, LLC, it's employees, assistants, and representatives assume no responsibility for injuries or illnesses which my minor child may sustain as a result of any physical condition or resulting from participation in any summer program activities or experiences. I expressly acknowledge on behalf of my minor child and heirs that I assume the risk for any and all injuries and illnesses which may result from my minor child's participation in these activities. I hereby release and discharge Denton Dance Conservatory, LLC, it's employees, assistants and representatives from any and all claims for accidents, injuries, death, loss or damage which I or my minor child may suffer as a result of participating in these activities. **(Initial _____)**
2. In the event that my child needs immediate medical attention for injuries/sickness experienced during DDC's summer dance camp, I authorize the Denton Dance Conservatory staff/representatives to give my child reasonable first aid, and to arrange transport of my child to a health care facility for emergency services as needed. **(Initial _____)**
3. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes. Denton Dance Conservatory receives medical information on campers/participants that may need to be shared with medical providers. **(Initial _____)**
4. I hereby understand that I need to escort my child to and from the building. **(Initial _____)**
5. I understand that all siblings will need to be chaperoned while in the building. **(Initial _____)**
6. I understand that part of a young dancer's training is learning to wear the appropriate attire (see other side) **(Initial _____)**
7. I understand fully that summer tuition and summer camp fees are due at time of registration. **(Initial _____)**
8. I am aware that no prorating or refunds will be issued due to missed classes. I am aware that I will not be able to transfer missed classes to the fall session. **(Initial _____)**
9. I understand that NO REFUNDS will be given unless a class or camp is cancelled by DDC. **(Initial _____)**
10. I exclusively give Denton Dance Conservatory, LLC the permission to use my child's picture and or video image for advertising and marketing purposes whether in print or digital media, including social media and online website. **(Initial _____)**

I have read the Waiver & Release, as well as the rules and regulations and understand them completely.

I have duly executed this Waiver & Release this _____ day of _____, 2018.

Signed: _____ Print: _____