

Paula Carr Dance Academy's Classes start Aug 10TH

Must register before Aug 3rd 2020 to reserve your spot / Plus email all PCDA Waiver and Policy Forms.

PARENT'S NAME _____

BILLING ADDRESS _____ CITY _____ ZIP _____

EMAIL _____ (mandatory) this is how we will notify you)

CELL _____

I WISH TO REGISTER: In -studio (circle) or Digital dance (circle) (Tuition is the same for both)

CLASS ONE: DAY _____ Class TIME _____

CLASS TWO: DAY _____ Class TIME _____

CLASS THREE: DAY _____ Class TIME _____

CLASS FOUR: DAY _____ Class TIME _____

DANCER NAME _____ DANCER Birthdate ____/____/____

SCHOOL _____ GRADE (going into) _____

CC info _____ / Zip code _____ / # code _____ Ex date _____

Due to our "new normal" & smaller class sizes for safe social distancing & new safety protocol. Your dancers spot is **only** insured through your full payment and Reg Fee. Your prompt payment will hold your dancers spot.

ALL FEES must be CC ON FILE for NO contact payment purposes. No cash or checks.

All classes have the option to be in studio or Digital if needed. Class times/ styles will be the same time and day.

Registration Fee to Hold a spot for all classes digital/ In studio: \$50 add on Sibling (discount) \$25

Email a copy of this form/ Plus policy/ waiver: Filled out to secure placement:

Email copy or picture of forms to: pcda_dancinfo@yahoo.com

By signing this wavier I / WE recognize and understand the risk of injury, illness, pandemic or other by participating in any group indoor/outdoor activity, dance, tumbling, performance, or exercise program with Paula Carr Dance Academy. I/WE are participating with the full understanding and agreement that I /WE are waiving and releasing Paula Carr Dance Academy and or their staff, directors, volunteers and representatives, from any and all claims except for illness and injury directly resulting from gross negligence or willful misconduct on the part of Paula Carr Dance Academy. I agree to comply with CDC recommendations & PCDA Policy/ Rules to keep my dancers home from any PCDA class, rehearsal, events, shows, if my dancer or in home family member indirect or other shows signs of cold / flu like illness or test positive for covid-19. Thus keeping our dance family & staff well and able to keep on dancing. I understand PCDA Faculty will be wearing a mask, as well as dancers upon entrance & exit of PCDA and if desired by child or parent -in class. I intend to follow PCDA safety procedures set in place, as we know it is our choice to attend PCDA classes. _____initial.

_____ Print Name _____ date

I understand any images/ videos taken by PCDA, may be used for promotional use **only**. _____initial.

By signing this, I certify I have read this document, Policies, Waivers and fully understand its content .

SIGNATURE _____ Date _____