

## 2016-2017 Season (September 2016 – June 2017) Dance Registration Forms

To register by Mail: Complete the registration/release form and mail it along with the fees to: Lisa McKinnis, In His Steps Ballet, 140 Buchanan St. N., Suite 156, Cambridge, MN 55008. Registration fee of \$25.00 per student or \$35.00 per family. Please make check payable to "Lisa McKinnis" or "In His Steps Ballet". Mother's Name \_\_\_\_\_ Preferred Phone ( ) \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_Zip Code Occupation \_\_\_\_\_ Place of Employment \_\_\_\_\_ Father's Name \_\_\_\_\_\_ Preferred Phone ( ) \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_Zip Code \_\_\_\_\_ Occupation \_\_\_\_\_ Place of Employment \_\_\_\_\_ Email Address \_\_\_\_\_ and/or \_\_\_\_ Student Name: Date of Birth: \_\_\_\_\_ Age \_\_\_\_ Grade \_\_\_\_ School Attending: Church Affiliation: \_\_\_\_\_\_\_ Please describe any medical conditions or special needs your child has, which the dance instructor should be aware of (include any medications that your child is taking.) Allergies: \*\*Note: Epipen must come into the classroom with your child if needed. Medications:

Special Needs: \_\_\_\_\_

## Student Release Form:

1,	am the parent / guardian (ADULT) enrolling my
child/children to	participate in lessons. I assume responsibility for
•	d, and hereby release Lisa McKinnis and or the Instructor, In His
	n His Steps Ballet & performing arts company, or the City of
•	e Cambridge City Center (landlord) from any or all liability for
• •	or personal loss incurred by my child(ren) or myself while sociated with classes or mini-series, or performances, or other
0 0	tand that ALL TUITION is NON-REFUNDABLE and DUE AT THE FIRST OF
	able to the instructor. Monthly fees are due weather or not you intend to
attend all said lesson	s. Our instructors reserved your lesson scheduled on a monthly basis and mus
	otice in writing if you desire to discontinue your lesson(s). A late fee of \$10 (Initials) I
	n His Steps Ballet, and In His Steps Ballet & performing arts company
permission to use ph	otographs of my child for advertising or news coverage and web and/or face
	Individual instructors and students and/or student's parents do NOT have the
	en. Instructors and/or parents must receive written permission per photo, aterials and may NOT post photos, written, or video material on FACEBOOK
without specific pern	nission and with appropriate acknowledgement. Further, any "outside"
	by students and instructors must include acknowledgement given to In His
	n His Steps Ballet & performing arts Company as all "work product" is the sole roperty of Lisa McKinnis and In His Steps Ballet and In His Steps Ballet &
Performing Arts Com	npany. Any and all photographs (professional or otherwise) are the solo
	eps Ballet & Performing Arts Company. You may not purchase photos from
	ners without written consent from Lisa McKinnis. (Please do not contact our series directly for this purpose). Studio photos will be available as deemed
	oto packages will be available in print as deemed appropriate by Lisa McKinnis
and the photographe	er.
Parent/Guardian/Stu	dent Dated
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Child's Measuren	nents: (Studio use only for costumes)
Girth:	_ (Measurement of the body length)
Chest:	_
Waist:	
Hips:	_
Hips: Shoe Size:	
Shoe Size:	
Shoe Size:	— (for tights sizing only)
Shoe Size: Weight: Height:	— (for tights sizing only)
Shoe Size: Weight: Height: Clothing Size: (Ci	— (for tights sizing only) —
Shoe Size: Weight: Height: Clothing Size: (Ci	