



## Enjoy a fun filled week of Dancing like a Princess!

Meet new friends and try new styles of dance along with exciting arts & crafts. End the week with a special princess tea party and performance! Bring your friends! We are going to have tutu much fun!





### Princess Camp Details & Registration Form

Student First,	/Last Name:			Birth date:	Ag	ge:
Are there any If yes, please	<pre>/ health concerns or allergies th e explain:</pre>			e of? 🗆 No 🛛	Yes	
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Mother's First	t/Last Name:	Fathe	er's First/Last Na	ame:		
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Student's Cel	l:	Main	Email Address:			
Home Street,	Mailing Address:					
City:		State		Zip:		
Emergency N	ames and Contacts:					
Previous Dan	ce Training - Studio/Teacher/#	of Years:				
How did you	hear about us?					
Please check	off which camp option you are p	articipating				
Place Ca	np Option	Dates	Times	Cost if Paid	Cost if Paid	Discount for

Place "X"	Camp Option	Dates	Times	Cost if Paid by 5/1/17	Cost if Paid after 5/1/17	Discount for 2 weeks
	Princess Camp 3-day Ages 2 1/2-4 1/2	July 11 <sup>th</sup> 12 <sup>th</sup> & 13th	9a-11a	\$75	\$95	
	Princess Camp 5-day Ages 4 ½-6 ½	July 10 <sup>th</sup> -14 <sup>th</sup>	9a-12p	\$150	\$175	
	Princess Camp 3-day ages 2 <sup>1</sup> / <sub>2</sub> -4 <sup>1</sup> / <sub>2</sub>	Aug 15 <sup>th</sup> 16 <sup>th</sup> & 17th	9a-11a	\$75	\$95	\$125 for 2 weeks
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TOTAL AMOUNT ENCLOSED: \$ Checks Payable to "Angela Bates Danc Cash – please obtain a receipt.	Please check one e Academy" CHECK # RECEIPT #
On-File Credit Card	CC # last 4 DIGITS
NEW Credit Card (please contact the o	ffice to process)



I, \_\_\_\_\_\_\_, natural parent and/or Guardian of \_\_\_\_\_\_(child), hereby acknowledge that certain risks of injury are inherent to participation in these dance related physical activities. These risks and dangers may be either caused by the action, inaction or negligence of the participant and others. There may be other risks not known or reasonably foreseeable at this time. I accept and assume such risks and responsibility for the losses and/or damages following such injury, however caused, and whether caused in whole or in part by the negligence of the named student above. If the student has a temporary restriction (sickness, sprain, soreness, etc.) I will inform the appropriate instructor on a daily basis in writing. I agree that the student and I will abide by the rules, regulations and policies of the Angela Bates Dance Academy ("ABDA"). I consent to the student's participation in ABDA physical programs, classes and activities. Recognizing the possibility of physical injury associated with these programs, classes and activities, I hereby release, discharge, indemnify, and hold harmless ABDA, its affiliated organizations, and their employees, teachers/subcontractors and associated personnel from and against any and all claims by or on behalf of the student as a result of the student's participation in the programs, classes and activities.

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### Princess Camp Details & Registration Form

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