

FALL 2009 REGISTRATION FORM

Please register early to avoid unnecessary cancellations due to low enrollment.

REGISTRATION DEADLINE IS SEPTEMBER 1, 2009

Please fill out one form per student.

Student Name: _____
 Phone: _____ Cell Phone: _____
 Date of Birth: _____ Age as of 9/8/09: _____
 Parent or Guardian Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Email: _____
 Anything else we need to know (medical concerns, disabilities, etc): _____

1. CIRCLE YOUR CLASSES IN THE SCHEDULE CHART BELOW

2. TOTAL THE TUITION AND FEES FOR YOUR CLASS(ES) HERE:

- A. _____ Total Tuition
 B. _____ Registration Fee (Only paid once per family)
 C. _____ Late Fee (if registering after August 25)
 D. _____ Total Registration (Sum of Costs A, B, and C.)
 E. _____ Discounts (Circle One - Family 10%, Berg Faculty/Staff 15%, Berg Student 30%)
 F. _____ Total after Discount
 G. _____ Performance Company Class Fee

H. _____ **Total Registration Fee** (Sum of Costs F and G)
 (Payment plans are available by request.)

I am enclosing a check for \$_____. (Made out to Muhlenberg College)

Please charge my Mastercard/Visa/Amex \$_____.

Card # _____ - _____ - _____ - _____ Card Code _____

Exp. Date ____/____/____

Signature _____

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<p style="text-align: center;">Please CIRCLE the classes that you plan to take:</p>			PERFORMANCE COMPANY 4:30-6:30pm BROWN		<p>BALLET III 9:30-11am ULS (6-9 yrs)</p>
<p>BALLET V/VI 4:30-6pm ULS</p>	<p>BEG. MODERN 4:30-5:30pm ULS (12 & under)</p>	<p>HIP-HOP 4-5pm ULS (9 & up)</p>			<p>BALLET I/II 10-11am BROWN (4-6 yrs) BALLET V/VI 9-10:30am LLS</p>
<p>POINTE 6-7pm ULS</p>	<p>INT. MODERN 4:30-6pm BROWN (12 & up)</p>	<p>BEG./INT. TAP 4:30-5:30pm CA 226 ADV. BALLET 5-6:30pm ULS</p>			<p>BALLET IV 10:30am-12pm LLS BEG. JAZZ 11am-12pm ULS (12 & under)</p>
<p>ADULT BALLET 7-8:30pm ULS</p>	<p>BALLET VI/VII 6-7:30pm BROWN</p>	<p>ADV. TAP 5:30-6:30pm CA 226 BALLET IV 5:30-7pm BROWN</p>			<p>ADV. BALLET 11am-12:30pm BROWN</p>
		<p>ADV. JAZZ 6:30-8pm ULS</p>			<p>ADV. MODERN 12:30-2pm BROWN (13 & up) INT. JAZZ 12-1:30pm ULS</p>
<p style="text-align: center;">To Locate your Classes on Campus: ULS - Upper Level Dance Studio, Trexler Pavilion LLS - Lower Level Studio, Trexler Pavilion CA 226 - Studio 226, Baker Center for the Arts BROWN - Dance Studio, Brown Hall</p>					

WAIVER FOR MDCDC CLASSES

CONSENT FOR MEDICAL TREATMENT

Permission of a parent or legal guardian must be obtained before medical treatment of any kind can be rendered to persons under 18 years of age. This consent form must be signed by a parent or legal guardian as evidence of your consent for treatment of the participant. If you are over 18 years of age, please disregard this portion of the form and complete the Indemnification Statement below. In the event that you, as parent or legal guardian, do not want treatment rendered under any circumstances, your signature, evidencing refusal of treatment is required below.

I grant permission to the Muhlenberg Community Dance Center staff and/or its third party designees including Muhlenberg College employees to administer first aid care as may be necessary for my son/ daughter.

OR

I refuse permission to the Muhlenberg Community Dance Center staff and/or its third party designees to administer first aid care as may be necessary for my son/daughter.

_____	_____
(Signed)	(Relationship)
_____	_____
(Participant)	(Date)

CONTROLLED SUBSTANCE POLICY

I certify that my son/daughter will not be in possession of any controlled substances including those prescribed by a physician, as defined by the Controlled Substances Act while a participant in the Muhlenberg Community Dance Center.

_____	_____
(Signed)	(Relationship)
_____	_____
(Participant)	(Date)

MUHLENBERG COLLEGE INDEMNIFICATION STATEMENT

It is further understood and agreed that Muhlenberg College does not manage or facilitate the Muhlenberg Community Dance Center and or any of its activities. Muhlenberg College's facilities are being made available for the Muhlenberg Community Dance Center.

I, _____ (parent/legal guardian), in full recognition and appreciation of the hazards and exposures involved do hereby voluntarily agree to assume all of the risks and responsibilities involving my/my child's participation in the Muhlenberg Community Dance Center: and further, I do for myself, my heirs, and personal representative(s) hereby defend, hold harmless, indemnify and release and forever discharge the Board of Trustees of Muhlenberg College and all of its officers, agents, employees and volunteers from and against any and all claims, demands, and actions, or causes of action of any sort on account of personal injury or death which may result from my/my child's participation in the Muhlenberg Community Dance Center. I have read and executed this document with full knowledge of its significance.

_____	_____
(Signed)	(Relationship)
_____	_____
(Participant)	(Date)