

Southern Sapphires Dance Company

3495 Fayetteville Rd, Lumberton NC

Registration Form

Name: _____

Age: _____

Date of Birth: _____

Address: _____

Telephone #: _____

Email Address: _____

Texting # if applicable: _____

Type/Types of Dance for
Enrollment: _____

Time or Day Issues For Classes: _____

Dance Experience: _____

Allergies/Illness: _____

Parents/Guardians: _____

Emergency Numbers: _____

I, _____, give my permission for my
child/children, _____, to participate in the Southern Sapphires Dance
Company classes. I also will not hold Southern Sapphires Dance Company and any of its
employees responsible for any accident that happens while at Southern Sapphires Dance
Company.

Parent Signature

Date Signed

SSDC Representative Signature/Date Signed