

Pinnacle Dance North

20801 N. Scottsdale Rd., Suite#201; Scottsdale, AZ. 85255 (480) 538-5355
danceatpinnacle@aol.com

Registration Form

Student Name: _____ Age: _____ DOB: ____/____/____

Address: _____

City: _____ State: _____ Zip Code: _____ Home Phone: _____

Parent/Guardian Name: _____

Work Phone: _____ Cell Phone: _____ Email: _____

Emergency Contact (other than parent/guardian):

Name: _____ Phone: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Pinnacle Dance North LLC assumes NO responsibility for loss or personal injuries occurred while on the Pinnacle Dance North premises. My child is covered on our personal/family insurance policy. If any injury or loss occurs, my personal/family insurance is my only source of reimbursement.

_____ *I have received & read all pages of this Registration Packet, and I fully understand and agree to abide by its terms.*

Parent/Guardian Signature: _____ Date: ____/____/____