

REGISTRATION FORM - 2024/25



Child Name #1:

Date of Birth: Gender: F M

Shirt Size: (Kids) (Adult) S M L XL

Child Name #2:

Date of Birth: Gender: F M

Shirt Size: (Kids) (Adult) S M L XL

Child Name #3:

Date of Birth: Gender: F M

Shirt Size: (Kids) (Adult) S M L XL

REGISTRATION FEE

\$75.00 / First Child

\$50.00 / Second Child

\$25.00 / 3+ Child

Mother's name: Cell #:

Father's name: Cell #:

Email Address for Information/Communication:

Emergency Contact person and telephone number:

Are there concerns we should be made aware of: No / Yes (please explain)

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Are there any allergies, medical history?

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My child(ren) can be picked up by the following people:

.....

.....

Photo Release Form:

From time to time, children's pictures will be taken and might be used for flyers, brochures, websites and other promotional purposes. I/We hereby consent to the inclusion of any photographs of my/our child (please print) and use of any photograph or videos.

I/We do not consent to my child being photographed.

I/We understand that I/we will indemnify, defend and hold the "Rozmaring Néptáncgyüttes" and its instructors, and also the St. Stephen's of Hungary Roman Catholic Church harmless from any claim, action, liability or costs out of my use of any portion of the property including the premises, common areas and facilities and for any accidents or injuries which may occur while taking classes here, whether they happen in class, before or after class, in performance, and/or in an alternative space.

Parent/Guardian Signature: Date: