



Kids On The Move



P.O. Box 456
De Pere, WI 54115
www.kidsonthemovewi.com
(920) 366-5565

Fall 2008 - Evening Registration Form

Child Name: _____ Birth Date: _____

Parent Name(s): _____

Address: _____ Phone: _____

_____ Work Phone(s): _____

Email: _____ Cell Phone(s): _____

Please circle appropriate class(es) for Tues. and/or Thurs. evenings:

Pre School Dance T or Th - Option #1: 8 mthly payments of \$32.00 _____

Elementary Dance Tues. - Option #2: 2X4 Pay \$128.00

Tap/Jazz Dance Thurs. 1st Pymt now, 2nd pymt in Feb. 09 _____

Special Needs Dance Tues. - Option #3: Full year payment of \$256 _____

Children's Choir Thurs. - Registration Fee: \$5.00 _____ \$5.00

Encore! Encore! T or Th **Total:** _____

Please make checks payable to: *Kids On The Move*

✓ Please mail to the P.O. Box indicated at the top of this form.

I understand and agree that *Kids On The Move* and its staff will assume no responsibility for injuries or medical expenses incurred by my child or myself. We agree to hold harmless, *Kids On The Move*, from liability for injury or damage to person or property as a result of said student's participation in *Kids On The Move* activities.

I have reviewed, understand and agree to comply with the contract terms stated in the contract.

I give permission to *Kids On The Move* to use photos or video of my child in brochures, pamphlets, or marketing materials used for educational and/or marketing purposes. _____ YES _____ NO

Signature: _____ Date: _____