



MOVING MIRACLES DANCE STUDIO

REGISTRATION FORM

16th ANNUAL DANCE-A-THON
SUNDAY, FEBRUARY 18, 2018-12PM-6PM
MICHAEL'S CATERING & BANQUETS
4885 SOUTHWESTERN BLVD.
HAMBURG, NY 14075

Participant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Birth Date: _____ Age: _____ Male: _____ Female: _____

Name of Dance Studio/School: _____

Shirt Size: (Select One)

- Youth Sm
- Youth Med
- Youth Lg
- Adult Sm
- Adult Med
- Adult Lg
- Adult XL
- Adult XXL

***If under 18 a parent/Guardian must complete**

Parent/Guardian's Name: _____

Home Phone: _____

Cell Phone: _____

In case of emergency, and a parent or guardian cannot be contacted, the event organizer is authorized to contact others as indicated below in the order listed:

Emergency Contact Name: _____ Phone: _____

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Participant Code of Conduct

1. Refrain from the use or possession of alcohol, drugs, or tobacco.
2. Refrain from the use of foul language.
3. Refrain from bullying fellow participants.
4. Respect others' personal space.



Waiver

In consideration of the acceptance of this entry, I hereby, for myself and my heirs, executors and administrators, waive any and all rights and claims for damages I may have against Moving Miracles, a Division of **sasi**, the event organizers, all event sponsors and all individuals associated with the event. None of the above are responsible for the loss of personal items, or any form of aggravation in connection with the event. I understand that I must be in good physical health to participate and do not hold event organizers liable for any problems associated with my physical condition. In filling out this form, I acknowledge I have read and fully understand my own liability and do accept the restrictions.

We agree that the participant code of conduct and terms of participation in the Moving Miracles Dance-A-Thon are important to the safety and well being of all participants. We agree to abide by these rules and the terms of participation and to conduct ourselves accordingly.

Signature of Participant _____

Signature of Parent/Guardian (if under 18 years old) _____

Date: _____

Date: _____