

**Step Above Most
Summer Intensive Registration**

Student's Name: _____ Date of Birth: _____
Parent's Name(s): _____
Address: _____ City: _____ Zip: _____
Phone: _____ Work Place: _____ Work Phone: _____

*The Camp runs from 10am- 2:30pm please provide a contact person who will be available if needed.

Person's Name: _____ Phone Number: _____

Previous Training: (If you dance at Step Above Most you need not fill this section out)

Studio Name: _____ City/State: _____

Years of training in Ballet: _____ Jazz: _____ Tap: _____ Gymnastic: _____

Circle One

***Intermediate-Advance Program**

July 26th - July 30th

Total Cost: \$250

***Children's Program**

August 2nd - August 6th

Total Cost: \$225

*Participants must have 3 years of dance experience

Lunch will be held from 12-12:30 everyday and participants must provide there own food and beverage.

Release: I _____ agree to adhere to the policies and guidelines set fourth by Step Above Most Dance Center. I understand that all photographs and images taken throughout the camp our property of Step Above Most Dance Center and may be used in advertising or promotional purposes.

Step Above Most Dance Center reserves the right to cancel any program due to lack of enrollment