

Kitchener Schwaben Club Kindergruppe/Jugendgruppe Registration Form 2012/2013

Are you a new dancer to the Kitchener Schwaben	Club Kindergruppe/Jugendgruppe? Yes No			
How did you hear about us?				
If yes, how many years have you danced with the Kindergruppe/Jugendgruppe?				
Name of DANCER:				
First:	Last:			
Date of Birth:				
Address:	City:			
Home Phone #:	Cell Phone #:			
Email (mandatory for dance group updates):				
(eg. EpiPen for allergy)	a, allergies, or other special needs we should be aware of?			
Address (If different from dancer):				
Contact Information (If different from dancer):				
Home Phone #:	Cell Phone #:			
Work Phone #:				
Name of PARENT/GUARDIAN #2:				
Address (If different from dancer):				
Contact Information (If different from dancer):				
Home Phone #:	Cell Phone #:			
Work Phone #:				
Name of EMERGENCY CONTACT (Must be a diff	ferent person than listed as Parent/Guardian 1 or 2):			
First:	Last:			
Home Phone #:	Cell Phone #:			

Name of FAMILY PHYSICIAN:

Name:	Phone #:
Address:	City:

I hereby release the Kitchener Schwaben Club Kindergruppe/Jugendgruppe volunteers and/or any persons involved with the direction/organization of the program and the Kitchener Schwaben Club, from all claims for damages arising from any accidents/injuries, which are caused by or arise from the participation of my child, in any facility or at any location where the group is performing/participating. In the event of an accident or illness involving my child while participating with the group, I hereby authorize the administration of any medical procedure deemed necessary. I also give permission for my child to be transported to the hospital with no liability on the driver. An ambulance may be called to transport my child to the hospital if necessary.

I hereby agree to the terms and conditions stated in the Kindergruppe/Jugendgruppe Registration Information 2011/2012 Package. I agree to follow the Uniform Care Instructions and I accept responsibility for damaged/lost items. I agree to return the uniform in original form upon completion of the dance year on specified uniform drop of night or upon resigning from the Kitchener Schwaben Club Kindergruppe/Jugendgruppe.

I hereby agree to the usage of video, pictures, first name and last initial of the registered dancer and first and last name of the parent/guardian for the purpose of communication in the club website, Parent/Guardian Monthly Newsletter and Calendar, Club display case, year end DVD, Nachrichten (Club Newsletter) and any advertising to encourage promotion and membership for the Kindergruppe/Jugendgruppe.

Parent/Guardian's Signature:	Date:
Office Use Only:	
Registration Deposit Collected:	Date Collected:
Tracht Deposit Remaining from 2011/2012:	
Tracht Deposit Collected:	