



EXCELSIOR SCHOOL *of* DANCE
AND PERFORMING ARTS

Summer Dance Intensive

July 15th - July 19th: 9:00am - 2:00pm

Ages 11+

Five days of ballet, conditioning, and choreography with Miss Peyton!
Two dances to be performed on Friday, July 19th, including a nationally traveled BE company dance, and a new contemporary worship dance.

SAVE \$50.00 if you Register with full payment by June 25th

Physical Address: 28555 Robinson Rd, Conroe, TX 77385 | Mailing Address: 435 Springwood Dr., Conroe, TX 77385 | www.excelsiordanceschool.com | excelsiorschoolofdance@gmail.com

Student Name: _____ Parents Name: _____

D.O.B. _____ Age: _____

ESD Ballet Grade/Level: _____

If new to ESD: Number of years Danced: _____ Where & Type of dance: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: (HM) _____ (WK) _____ (Cell) _____

Email: _____

****Email is our main channel of communication****

Due to the nature of the exercises taken by the students of dance school, parents are warned that children suffering from asthma, orthopedic injuries, or degenerative back complaints should seek the advice from an appropriate medical practitioner or specialist before enrolling a student in the dance school. All reasonable care will be taken for the welfare of the students: however, in the case of injury or accident, the school will assume no responsibility. In the event of a medical emergency, and where a parent cannot be contacted, I authorize Excelsior School of Dance to seek medical advice and treatment.

This agreement fully represents all terms and considerations and no other statements, conditions, or promises are made in conjunction with this release form. I give permission to Excelsior School of Dance to use, without charge and without reservation, my likeness in any medium and for any lawful purpose, including promoting the institution, its programs and services. I waive any rights of action I may have and release Excelsior School of Dance and its licensees from any and all claims I may have arising from use of my likeness, including any rights to sue for defamation or violation of my rights of privacy or publicity.

Intensive Tuition: \$350.00 (Deduct \$50.00 if paid in full by June 25th)

Registration Fee: \$10.00

Total Amount Due/Paid: \$ _____

Payment Method: Cash: \$ _____ Check #: _____ Total on Check: \$ _____