

**Michelle's Studio of Dance, Inc.**  
602 Oak Street East Bridgewater MA, 02333  
(508) 690-1350

**Registration Summer 2025**

Reg. Date \_\_\_\_\_  
Payment \_\_\_\_\_  
Confirmation Email \_\_\_\_\_

**Student Information**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Grade (As of September) \_\_\_\_\_ Birthday \_\_\_\_\_ Years of Dance \_\_\_\_\_

**Parent/Guardian Information**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ MA Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_

**Check off all the classes in which you wish to enroll:**

\_\_\_ Pre-Pointe                      \_\_\_ Classical Barre Intensive                      \_\_\_ Pointe  
\_\_\_ Contemporary              \_\_\_ Dance Camp                      \_\_\_ Tutus & Tumbling                      \_\_\_ Creative Movement  
\_\_\_ Ballet Comprehensive              \_\_\_ Choreography/Technique              \_\_\_ Pointe Comprehensive              \_\_\_ Acro

*\*All classes require a \$25 non-refundable deposit payable by cash or check. Final balances are due by the first class and are payable by cash or check.*

**\_\_\_\_\_** I hereby release all owners, staff, instructors, and all other liable parties and will not hold them responsible for any and all personal injury or damages with result to or from my participation at MSOD.

**\_\_\_\_\_** Photos and/or videos may be taken throughout the dance season of your child. With your permission these will only be used on MSOD Social Media websites and/or for advertisement purposes.

Parent or Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_