

Bring a Friend to Dance – Consent Form

DBSD Student: _____

Class Time & Discipline Friend is Attending: _____

*****To be filled out by parent or guardian**

**please fill out a form for every class and friend, this form is required at beginning of each class.*

Friend's information:

Name: _____ Birth Date: _____ Age: _____

Parent/Guardian (s)name: _____

Address: _____

Postal Code: _____ Phone Number: _____ (Cell) _____

E-Mail address: _____

Any Medical Concerns? : _____

Friend's Emergency Contact Information:

Emergency Contact: _____

Relationship to student: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

Where would you like to be contacted in case of emergency? _____

Photo Image Release:

I give DBSD permission to use images of my child on the DBSD website (www.dbsdance.com) and/or in print, provided names are **not** published or images shared.

YES

NO

Signature: _____