

# Summer Intensive Registration Form 2021

## NATIONAL QUALIFIERS

Name _____
Date of Birth _____
Address _____
Parent's Names _____
Home Phone _____
Cell Phone _____
Email _____

Allergies: \_\_\_\_\_

Asthma: YES/NO

If "yes", do you use an inhaler? \_\_\_\_\_

Please list any current and/or chronic dance injuries: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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**Liability Disclaimer:**

→If my child exhibits fever, shortness of breath, cough, chills muscle pain, sore throat, loss of taste or smell, or has been exposed to someone who has COVID-19, I will not bring my child to class. Initial: \_\_\_\_\_.

→If my child displays any of these symptoms while at the Griffith Academy, he/she will be sent home. Initial: \_\_\_\_\_.

→I will not hold The Griffith Academy or it's Staff liable should a student or family member contract COVID-19. Initial: \_\_\_\_\_.

→The Griffith Academy will not be held responsible for any health problems or for any accident resulting from a student's negligence, or from failure to inform the Academy of any condition affecting a student's health, either on this form or during the period of lessons. Initial: \_\_\_\_\_

### Registration and Tuition – **Due by May 2nd**

SESSION I - Monday – Thursday, June 14 – 17 (6:00 to 8:00 p.m.)

SESSION II – Monday – Thursday, June 21 – 24 (6:00 to 8:00 p.m.)

Cost: \$125 for either individual session OR \$225 for both sessions

Please make checks payable to the Griffith Academy. You may bring your registration form to class or mail it to 31 Middletown Avenue, Wethersfield, CT 06109

The Griffith Academy will not be held responsible for any health problems or for any accident resulting from a student's negligence, or from failure to inform the Academy of any condition affecting a student's health, either on this form or during the period of lessons.

Signature of Parent or Guardian \_\_\_\_\_

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