

**Summer Intensive Registration Form 2025**  
**OPEN CHAMPIONSHIP & NATIONALS QUALIFIER**

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

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

Asthma: YES/NO

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

Please list any current and/or chronic dance injuries:

\_\_\_\_\_

\_\_\_\_\_

Registration and Tuition – **Due by May 15, 2025**  
**Mon., Wed., Thursday - June 16, 18, 19**  
**Mon., Wed., Thursday - June 23, 25, 26**  
**(6:30 to 8:30 p.m.)**  
**Cost \$135 per week / \$240 for both weeks**

Please make checks payable to the Griffith Academy. You may put your registration form and payment in the upstairs box 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 \_\_\_\_\_