



CMC DANCE COMPANY
6092 ROUTE 31, CICERO, NY 13039
315.699.2355

GROWN-UP & ME REGISTRATION FORM

DATE _____ NEW RETURNING

CHILD NAME _____ FEMALE MALE

DATE OF BIRTH _____ AGE AS OF REG DATE _____

GROWN-UP NAME(S) 1. _____ 2. _____

ADDRESS _____ NEW ADDRESS

RELATIONSHIP: _____

MOM CELL _____ DAD CELL _____ OTHER CELL _____

EMAIL ADDRESS 1* _____ *REQUIRED*

EMAIL ADDRESS 2 _____

8-WEEK SESSION FOR GROWN-UP & ME AT CMC

STEP INTO A WORLD OF MOVEMENT, MUSIC, AND IMAGINATION! THIS JOYFUL CARETAKER-AND-CHILD DANCE CLASS IS DESIGNED FOR LITTLE ONES UNDER THREE AND THEIR GROWN-UPS TO EXPLORE CREATIVE EXPRESSION THROUGH MOVEMENT. EACH SESSION BECOMES A SPECIAL BONDING EXPERIENCE-WHERE TINY DANCERS TAKE THEIR FIRST STEPS INTO THE MAGIC OF DANCE

| CLASS DAY | CLASS TIME | CLASS COST |
|---|------------------|--|
| <input type="checkbox"/> WEDNESDAYS 1/7/2026 – 3/4/2026 NO CLASS ON 2/4/2026 | 10:00 – 10:45 AM | \$96 PAYMENT IS DUE AT REGISTRATION. NO REFUND FOR MISSED CLASSES |

PARENT NAME OR PERSON RESPONSIBLE FOR ACCOUNT (please list if more than 1 person is responsible)

NAME _____ CELL PHONE _____

ADDRESS _____

NAME _____ CELL PHONE _____

ADDRESS _____

SIGNED _____ PARENT OR PERSON RESPONSIBLE FOR ACCOUNT

READ & SIGN REVERSE SIDE →

OFFICE USE ONLY

| | | | | | |
|-----------|-------------------------------|-------------------------------|-----------------------------|----------|------|
| AMOUNT \$ | <input type="checkbox"/> CK # | <input type="checkbox"/> CASH | <input type="checkbox"/> CC | REC'D BY | DATE |
|-----------|-------------------------------|-------------------------------|-----------------------------|----------|------|

PAYMENT POLICY

All payments are due at the time of registration and are non-refundable. The fee for a returned check is \$45. Please Do Not leave cash at the front desk if nobody is there to accept it.

Should this provision have to be enforced by legal means, the undersigned person(s) is responsible for payment, as liquidated damages, the costs of collection, plus interest at the legal rate and reasonable attorney's fees as determined by the Court.

DANCE ATTIRE

Comfortable clothing. Participants can wear sneakers or go barefoot.

ATTENDANCE

Grown-Up and Child should arrive promptly. Keep absences down to a minimum for optimal learning. No refund for a missed class.

CANCELLATION OF CLASSES

Are non-refundable. Our cancellation policy is if the CNS school district is closed or implements an early dismissal due to weather we are closed. If the CNS school district has a one hour delay we are open, if the CNS district is on a 2 hour delay, evening classes will be held. Please check the CMC website or our Facebook page for class status.

MEDIA USE RIGHTS PERMISSION

I understand and authorize the use of any pictures taken at CMC Dance Company related events for use in print ads, social media, website, and other forms for purposes of advertising and promotions by the CMC Dance Company.

I have read and understand the above referenced policies and agree to abide by the guidelines.

| PERSON RESPONSIBLE FOR ACCOUNT | |
|---------------------------------------|-------|
| Signature: | _____ |
| Date: _____ | |
| Print Name: | _____ |

INJURY WAIVER AND GENERAL RELEASE FORM

By signing your name below as a participant, and/or parent/legal guardian of

(Participant Name): _____

you acknowledge that participation in the program exposes you to a possibility of personal injury. You, being fully aware of these possible risks of personal injury, release CMC Dance Company, Inc., their directors, officers, employees, agents, licenses, subsidiaries, consultants, independent contractors, and affiliates from any and all liability from personal injury, property damage, or other claims arising from or in connection with your participation in the program that are known and unknown, unforeseen, future or contingent.

You acknowledge that you have read and fully understand the injury waiver and general release form. This agreement shall be binding to you, your spouse and/or your child.

| | |
|---|-------------|
| Parent/Guardian Signature: _____ | Date: _____ |
| Print Name: | _____ |