

## Registration Form

Please save this form to your computer, complete the form, and email it to [info@danceability.com](mailto:info@danceability.com) or print and mail to: DanceAbility International, 576 Olive St., Suite 208, Eugene, OR 97401. Classes are not at this address.

2017 WINTER SCHEDULE: EUGENE, Thursdays, January 19 - March 9:  
Adults, 5:00-6:00p.m.; Teens, 4:00-5:00p.m., at Hilyard Community Center, 2580 Hilyard St.

COTTAGE GROVE, Mondays, January 23 - March 13: Adults and Teens Combo Class,  
5:15-6:15p.m., at CG Body Studio, 28 S. 6th St. B. Cottage Grove.

THE PARTICIPANT WILL ATTEND THE FOLLOWING CLASS:

Eugene Adults (5:00 p.m.)

Eugene Teens (4:00 p.m.)

Cottage Grove Adults/Teens Combo (5:15p.m.)

TODAY'S DATE



**PARTICIPANT INFORMATION (if address, etc. has not changed from prior registration, leave blank if desired)**

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

PHONE

PRIMARY EMAIL

DATE OF BIRTH

AGE AS OF  
JANUARY 1, 2017

CAN PARTICIPATE  
INDEPENDENTLY?

Yes

No

IF NO, PLEASE  
EXPLAIN

Please provide any information that you feel would be useful for the teacher to best support the student:



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## EMERGENCY CONTACTS

### PRIMARY CONTACT

CONTACT NAME

PHONE 1

PHONE 2

PRIMARY EMAIL

SECONDARY EMAIL

CITY

STATE

RELATIONSHIP TO  
PARTICIPANT

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### SECONDARY CONTACT (Optional)

CONTACT NAME

PHONE 1

PHONE 2

PRIMARY EMAIL

SECONDARY EMAIL

CITY

STATE

RELATIONSHIP TO  
PARTICIPANT

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## PARTICIPANT GUARDIANSHIP

NAME OF  
GUARDIAN

RELATIONSHIP TO  
PARTICIPANT

PARTICIPANT LIVES  
WITH

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**AIDE INFORMATION**

Please complete if participant will be attending with an assistant

PRIMARY AIDE  
NAME

PHONE

EMAIL

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SECOND AIDE  
NAME

PHONE

EMAIL

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**ANY ADDITIONAL INFORMATION YOU WOULD LIKE TO PROVIDE?**

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**HOW DID YOU HEAR ABOUT THIS CLASS?**

Newspaper

Word of Mouth

Website

Facebook

Flyer

Email from:

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**RELEASE AGREEMENTS**

I give permission for photographs, videos, and interviews to be used by DanceAbility International to increase community awareness of this program.

Yes

No

**RELEASE FROM LIABILITY AGREEMENT.** DanceAbility International does not provide medical insurance coverage for its participants. In consideration of the right to participate, each participant must acknowledge there are risks inherent in any kind of activity, and must agree to assume those risks on his/her own behalf, releasing and holding harmless DanceAbility International, its officers or agents from all claims for injury or losses suffered from participation. Registration and/or payment of any registration fee shall be deemed an admission of agreement to the terms stated above.

By typing or writing my name here, I am registering (or registering a minor I am responsible for) for the DanceAbility class and agree to the Release from Liability Agreement.

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## SCHOLARSHIPS

All scholarship requests will be accommodated exactly as requested (when grant funding is available).

I AM REQUESTING A SCHOLARSHIP

Full

Partial (Specify Amount \_\_\_\_\_)

I AM ABLE TO PAY

I WOULD LIKE TO SPONSOR A PARTICIPANT. I AM ENCLOSING

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## PAYMENT INFORMATION

**TO PAY BY CHECK:** Please mail payment to  
DanceAbility International  
576 Olive Street, Suite 208  
Eugene, OR 97401

Full tuition is listed here. Scholarship recipients, please adapt payment accordingly.

Cottage Grove \$80.00

Eugene \$80.00

**TO PAY BY DEBIT CARD OR CREDIT CARD THAT CAN BE USED AS A DEBIT CARD:** Please notify DanceAbility International by phone at 541-357-4982 or email at [info@danceability.com](mailto:info@danceability.com) and we will email you a payment request.

**TO PAY BY CREDIT CARD, PLEASE PAY BY PAYPAL:** Please visit [www.paypal.com](http://www.paypal.com) and type [info@danceability.com](mailto:info@danceability.com) as the recipient. Please add 3% to your payment when paying through PayPal.