

Montreal Entertainment Company

Registration Form

Participant's Personal Information (Please print clearly):

<u>First Name :</u>	<u>Last Name :</u>
<u>City :</u>	<u>Postal Code :</u>
<u>Phone Number :</u>	<u>E-mail Address :</u>
<u>Date of Birth (yyyy-mm-dd) :</u>	<u>Emergency Contact Name & # :</u>

How did you hear about the Montreal Entertainment Company?

Advertising Daily Deals Site Direct-mail Flyer Friend
Internet Yellow Pages Other: _____

What is your primary goal with the Montreal Entertainment Company?

(Select all that apply)

For Fun Professional Other:

Have you taken dance lessons before? Yes _____ No _____

If yes, what kind of dance and for how long?

What style of dance will you be taking with us?

___ Belly Dance ___ Burlesque ___ Samba

Please list any pre-existing medical conditions or injuries
(Including pregnancy):

I agree to inform my instructor at the start of each class about any pre-existing medical conditions, injury, or pregnancy.

Initials

The ME is not responsible for any lost or stolen items.