

Voter's School of Dance

341 South Broadway, 2nd floor, Unit #16
Route 28, Salem, NH 03079
info@votersdance.com

Summer Camps Registration and Release Summer 2026

Student(s) Name Birthdate Home Phone Parent(s) Name (if under 18)

Address

Email Address

Parent's Email Address

Physical Limitations (if any):

Previous experience (new students only):

Please select the camps for which you would like to enroll:

_____ Princess Dance Camp	9:00 – 12:00 July 17th	\$50
_____ Taylor Swift Dance Camp	9:30 – 2:00 August 14th	\$80
_____ Dance Intensive (Mandatory for comp)	9:00 - 3:00 August 21st	\$100
_____ Wicked Dance Camp	9:00 - 12:00 August 3rd	\$50

Total Due: _____

Tuition: I understand that I am responsible for the entire tuition of classes for which I have registered and that tuition payments will be applied to the term in which they are paid. Students may not participate in the class until tuition is paid. There are no refunds for missed class or voluntary withdrawal from VSD during the term. Refunds will only be given in the event of prolonged illness or injury, verified by a doctor's excuse.

Signature _____ Date _____
(If under 18, signature of parent or legal guardian is required)

Consent: I hereby grant to Voter's School of Dance (VSD) and the Methuen Ballet Ensemble (MBE) permission to take photos, videos, and/or films of me, my son and/or daughter and consent to the use of such materials for promotional purposes by VSD/MBE.

Signature _____ Date _____
(If under 18, signature of parent or legal guardian is required)

Release: I recognize the inherent risks of accident and injury associated with any program of exercise or dance and acknowledge that I am participating upon the express understanding that I am willing and able to accept full responsibility for my own safety and welfare. I hereby release Voter's School of Dance (VSD) and the Methuen Ballet Ensemble (MBE) and agree to hold VSD/MBE harmless from and against any and all claims and liabilities whatsoever which I may have arising out of my participation at VSD/MBE, except for those resulting directly from the gross negligence or willful misconduct of VSD/MBE. I hereby execute and deliver this Release to induce the Voter's School of Dance and the Methuen Ballet Ensemble to permit me to participate in its programs.

Signature _____ Date _____
(If under 18, signature of parent or legal guardian is required.)