

REGISTRATION FORM

Registration Date: _____

This is a drop off program, no parent participation necessary

525 Newark Pompton Turnpike Please drop off in rear playground door entrance.

\$175.00 7:30am-6pm M-F Checks Payable to: The Happy Dance, LLC

Please mail registration form to: The Happy Dance, LLC- PO Box 62, Pequannock, NJ 07440 Credit card Visa or Master card option available by contacting: Heidi Robak 973-713-9066



Child Name: _____ Age _____

Parent _____ Cell _____ Email _____

Parent _____ Cell _____ Email _____

Guardian _____ Cell _____ Email _____

Address: _____

Allergies: _____ Reaction: _____

Food Allergy: _____ Type: Touch/Air/Ingestion _____

Emergency Contact/alternate pick-up person Name: _____

Phone: _____ Relationship: _____

Child Issues to be aware of: Child 1

Please use the back of this paper if you need to leave more information.

I hereby give permission for my child/children photos to be used in advertising & promotion of Fairy Lady Camps without names being published. Signed _____ Date _____

I hereby accept any and all responsibility for and assume the risk of any and all injury or damage to my person or dependent children which might arise directly or indirectly as a result, and or participate in the Happy Dance, LLC program. I hereby expressly release, discharge, and hold harmless from any liability whatsoever the Happy Dance, LLC, the various branches, and divisions thereof, and all employees and volunteers in their capacities as representatives of the Happy Dance, LLC, expressly including, but not limited to, Heidi Robak. Except for injuries caused intentionally, or by willful misconduct. I certify that I am familiar with the contents of this release, that I have read and understand the same, and that it is my intention by signing this release that the same be binding not only on me, but my heirs, administrators, executors, successors, and assigns.

Parent /Guardian Signature: _____ Date: _____