

Time To Dance

With TLC

mail to 223 Lake Rd.
McHenry, MS 39561

Registration Form

Date: _____

Student's Name: _____

Age: _____ Birthday (month/date/year): _____

Parent's Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Emergency Contact:

Medical History:

I agree that any injury sustained to my child or myself while on the premises of, or in the studio, or in the presence of a teacher: I will be responsible for. Therefore, I will not hold Michelle's Studio 2210 (location of studio), or Mrs. Teresa Forrester responsible in any shape, form, or fashion.

Sign _____

Date _____

For questions please email tlc@timetodancewithtlc.com or call (228) 669-1209