



JAM DANCE 2026 SUMMER REGISTRATION

New Student

Current Student

(Fill out NAME ONLY of part A OR ANY CHANGES)

A. Students last name: _____ First name: _____

Age: _____ DOB: _____ Gender: _____

Street Address: _____ Apt# _____

City: _____ State: _____ Zip: _____

Last Name: _____ First Name _____ Relationship: _____

Home phone: _____ Cell phone: _____ Work phone: _____

Email: _____

Signature of parent/guardian _____ Date _____

AGREEMENT FOR PARTICIPATION AND TREATMENT OF MINOR INJURIES:

This signature is required for participation of all minor children. By signing this form, the parent or guardian consents to the minor's participation in all JAM Dance Academy, LLC activities and treatment of any sort deemed necessary by the proper supervisors for any illness or injury resulting from minor's participation in all activities.

Signature of parent/guardian _____ Date _____

PART I OR II MUST BE COMPLETED PRIOR TO ENROLLMENT

PART I – TO GRANT CONSENT AND RELEASE OF INFORMATION

I hereby give consent for the following medical care providers to be called in the event of a medical emergency:

Doctor: _____ phone# _____

Dentist: _____ phone# _____

Medical Specialist: _____ phone# _____

In the event reasonable attempts to contact my emergency contact and/or me have been unsuccessful, I hereby give my consent for the administration of any medical treatment deemed necessary by above named doctor/dentist, or in the event the designated preferred practitioner is not available, by another licensed doctor/dentist and the transfer of myself and/or my child to any hospital reasonably accessible.

This authorization does not cover major surgery unless the medical opinions of two other licensed physicians/dentists, concerning the necessity for such surgery, are obtained prior to the performance of such surgery.

List any allergies, medications currently taking or physical impairments: _____

Signature of parent/guardian _____ Date _____

PART II-REFUSAL TO CONSENT

I do not give my consent for emergency medical treatment for my minor child. In the event of illness or injury requiring emergency treatment, I with the following action to be taken: _____

Signature of parent/guardian _____ Date _____

PLEASE CHECK THE CLASSES TAKEN : THERE WILL BE NO DISCOUNTS FOR CLASSES MISSED

2026 SUMMER CLASSES

INT/ADV CONDITIONING AND JUMPS
\$200
Ages 12 & Up
July 13-16
5pm-7pm

LITTLE JAMMERS SESSION II: \$90
Ages 3-4
July 7-9
5pm-5:30pm

LITTLE JAMMERS SESSION I: \$90
Ages 3-4
June 23-25
5pm-5:30pm

IT'S YOUR TURN: \$100
Ages 10 & Up
July 7-9
5:30-6:30pm

Total Amount to be Paid: \$ _____ *JAM Dance Academy cannot pro-rate for any classes/weeks missed.

Cash: Check: Please make checks payable to JAM Dance Academy

Venmo: Please list name of child and summer class.

FORMS MUST STILL BE COMPLETED RETURNED ON OR BEFORE 5/31.

Forms with CC payment can be emailed to info@jamdanceacademy.net or sent to:

34453 Center Ridge Road, North Ridgeville, OH 44039



NAME ON CARD _____

CC# _____

CVC Code: _____ **EXP DATE:** _____ **ZIP CODE** _____

A 5% convenience fee will be posted for credit card charges. INL: _____

No refunds will be given. _____ INITIAL

***We must have a minimum of 3 children for each class. In the event a class is cancelled, JAM will refund payments made.**

Photo Release

I hereby give JAM Dance Academy permission to use any photos and/or videos for advertising, website, or other media outlets in and out of year registered. Student's names are not posted.

Yes I give my permission No, I do not give my permission

Signature of parent/guardian _____ **Date** _____

JAM DANCE ACADEMY CORRESPONDS TO YOU VIA EMAIL. PLEASE CHECK YOUR SPAM ACCOUNT OR PLACE JAM IN YOUR CONTACT INFORMATION. CORRESPONDENCE SENT TO PARENT EMAIL PROVIDED ON FORM.

ATTIRE:

Little Jammers: Light Pink leotard, tights, canvas ballet slippers and hair up and off of face in a bun if permissible

INT/AVD BALLET: Any color leotard, pink tights, canvas ballet slippers, hair up and off face in a bun

It's Your Turn: Any style leotard (no street clothes), dance shorts or pants, ballet slippers, hair must be up and out of face in a bun.