

## TATRY SONG AND DANCE ENSEMBLE REGISTRATION FORM 2025/2026

PANCER'S FULL NAME	First name	2	
	Last Name	2	
OATE OF BIRTH	Day:	Month:	Year:
ALLERGIES/DIETARY RESTRICTIONS			
pi –Pen	Yes No		
ELEPHONE NUMBER	HOME		CELL
MERGENCY CONTACT PERSON			
MERGENCY CONTACT PHONE #			
-mail			
lome address (Street/ city/ postal ode)			
1. PRACTICE PARTICIPATION CO	NSENT FOR	<u>M</u>	
	the group vunderstand r cost.	vill be properly super and agree that the o	ervised and that reasonable safety committee assumes no responsibility enization and participate in ALL
(date) (dancer's signat	ture if over	18) (pa	arent's /legal guardian's signature)
2. PHOTOGRAPHY/VIDEOTAPIN	G CONSENT	• -	
l.	. paren	t/legal guardian of_	
(Parent/Legal Guardian's name)			(Dancer's name)
			my son/ daughter. I also consent to
the use of these photos and vide	•	, -	<del>-</del>
	-		of advertisement for the Tatry Song paper articles or other social media.
(date) (dancer's sign	nature if ove	 er 18) (	parent's /legal guardian's signature )