



Welcome to Darby's Dancers!

Please complete this form with as much detail as possible. We will use this information to partner our coaches with your dancer and for our team to review as we prepare for your dancer. Let us know how we can make this a success for your child. We will do our best to include these elements in our coaching plans for your dancer.

FAMILY AND DANCER INFORMATION

Date of Application _____

Parent(s) Name _____

Address _____ Cit _____

State _____ Zip _____

E-Mail Address _____

Home Phone _____ Cell
Phone _____

Dancer Name _____ Nickname (if
preferred) _____

Date of Birth (Month/Day/Year) _____

School _____ Grade _____

Allergies _____

What is your child's diagnosis? Please be specific so we can prepare for his/her needs.

What items are addressed in their IEP or therapy plans that we can assist with or be aware of?

What would you like your coach assistant do to help your dancer:

- Move in wheelchair/help with walking aids
- Specialized care-please discuss with me personally
- Other, be specific

Please check any of the following items that apply to your dancer:

- Sensitive to rough textures/fabrics
- Allergic to perfumes/dyes/smells
- Sensitive to lights
- Bothered by loud sounds
- Problems keeping on task/staying focused
- Runs away from group or person in charge
- Minimal help needed

_____ Anything else that we need to be aware of? Please list below:

Our high school age coaches are usually (but not mandatory) accomplished dancers who want to share what they love with your dancer. They will typically help with the following areas: help dancers stand, help with focus & following directions, help with safety issues related to stability, encourage verbally and with praise or hugs. If care is needed beyond this level, we will meet to see how we can work together to address the needs.

Students must be able to exhibit basic communication skills (dancers can be non-verbal, just need to be able to communicate at a basic level). Students need to exhibit appropriate social behavior and general self-control that would be expected for their age with expected developmental disabilities. We are not trained special education experts and are not equipped to work with all students including severe discipline problems or children with difficult medical care. We will seek to provide dance education to as many children as possible. Your child's safety is of the utmost importance to us. If for any reason, you have concerns regarding the safety/treatment of your child, please notify the dance instructor, program coordinator and studio owner **immediately**. Darby's Dancers National Organization is not responsible for any safety issues that might arise in the local dance studio.

_____ Please read the information and initial acknowledging your understanding of the information above.

Please complete the following- these sizes will be used for costuming

Shirt Size: _____

Measurements:

Pant/short size: _____

Bust: _____

Pants waist number: _____

Waist: _____

Size for tights: child xs adult xs

Hips: _____

Photo and Video Release:

Please read the following statements and sign at the bottom of the page.

By signing this release, I authorize the program to use the following personal information for my family and dancer:

- Pictures-including photo, motion, electronic images
 - Voices-including sound and video recordings
- I grant the right to publish, reproduce for all purposes and copy my image as needed for the benefits of the organization. This includes but is not limited to print media and video recorded for the purpose of the program. I waive the rights for any compensation for the use of the photos, audio, media and for any of the finished photos, audio and video, advertising recording and copyrighted materials, including anything generated by a computer.

I acknowledge that I have read the following and I am in full agreement with this document.

PRINT NAME _____

PHONE NUMBER _____

By signing this I am acknowledging that I am signing for my under age child and on behalf of my family members and I am granting permission for my child to participate in all aspects of Darby's Dancers.

Signature _____ Date _____

