

Clifton Dance Project

19171 Magnolia St
Huntington Beach, CA 92646

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cdpdance@verizon.net

Keith Clifton

Linda Clifton

MEMBERSHIP FORM

| | |
|------------------------|--------------------------|
| Student Name: | |
| Age: | Today's Date: |
| Street Address: | |
| City: | State: |
| Zip Code: | |
| Student Phone: | |
| Birth Date: | Sex M F |
| Student Email: | |

| |
|-----------------------|
| Father's Name: |
| Cell Phone: |
| Email: |

| |
|-----------------------|
| Mother's Name: |
| Cell Phone: |
| Email: |

| |
|-----------------------------|
| Medical Information: |
| Doctor's Name: _____ |
| Phone #: _____ |
| Allergies: _____ |

Liability Disclaimer

Clifton Dance Project and the instructors are not liable for personal injuries or loss of, or damage to personal property for any and all participants or their guests. Each student may decline to participate in any activity. Please inform the instructor of any physical limitations you may have. If you have any doubt as to your physical abilities, please consult with your physician before participating.

Signature Required _____
Parent signature required for students under 18 years of age.

PLEASE PRINT ALL INFORMATION