



ALL ABOUT DANCE, INC. Rae Lyne Melancon, Owner  
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Dancer's Name \_\_\_\_\_

Mother's Full Name \_\_\_\_\_ Father's Full Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mother's Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

Father's Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

Email address: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ School Grade \_\_\_\_\_

Years of *Past* Experience \_\_\_\_\_ Taken Where? \_\_\_\_\_

Any Medical Conditions? ( ) No ( ) Yes – If so, please explain \_\_\_\_\_

*Which Class Will You Be Taking?*

\_\_\_\_\_ TAP/JAZZ (1HOUR) \_\_\_\_\_ TAP/JAZZ (1 ½ HOURS)  
(Teachers will determine the student's placement according to age & experience for these classes)

\_\_\_\_\_ BALLET  
Tiny  
Beginner  
Intermediate

\_\_\_\_\_ HIP HOP  
Tiny  
Mini  
Beginner  
Intermediate  
Advanced

\_\_\_\_\_ POINTE  
Beginner  
Intermediate  
Advanced

\_\_\_\_\_ LYRICAL \_\_\_\_\_ BOYS ONLY HIP HOP \_\_\_\_\_ CONTEMPORARY

LIST **ONE** DAY AND TIME THAT YOU ARE UNABLE TO ATTEND DANCE CLASS

WHAT IS THE EARLIEST TIME THAT YOU CAN COME TO DANCE CLASS?

\_\_\_\_\_(INITIAL) I/We, the undersigned, being the parents and/or legal guardian of the listed child do hereby agree to hold Rae Lyne L. Melancon and her teachers (DBA - All About Dance, Inc.) free and harmless from any injury claim which the named child may incur as a result of taking dance steps taught. I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child may be exposed to or infected by COVID-19 by attending class and activities hosted by All About Dance, Inc. Being advised of such we hereby reiterate to hold All About Dance, Inc. and their teachers free, clear and harmless from any of these risks and do hereby expressly assume these risks on behalf of our children. I understand that I am responsible to pay my account by the first dance class of each month from August to April and that all fees are nonrefundable. I also agree and am responsible to pay all fees charged until the recital in April, including but not limited to tuition each month. By agreeing to the Terms and Conditions of this Registration, I give permission to All About Dance, INC. to take and post pictures of my child to their social media platforms, i.e. Facebook and Instagram. \*

Referred By: \_\_\_\_\_ Dance Sibling Name \_\_\_\_\_

For Office Use Only: CLASS# \_\_\_\_\_ (A \_\_\_\_\_ B \_\_\_\_\_ C \_\_\_\_\_)