

TRYOUT RELEASE FORM

APPLICATION RELEASE	
I, (applicant name), have rea	ad all rules and regulations that govern the (school/team) Dancers. As a representative of my school, I understand
and agree to abide by them if selected as a dancer for the	
Signature of Applicant	Date
PARENTAL RELEASE	
I, the undersigned, have read and fully understand the rules and chosen to represent that this is an extracurricular activity and that attendance at all p is a requirement of the elected dancer.	as a dancer. I further understand
I hereby give consent to my son/daughter,	, to tryout for dancer at (school) _ and recognize his/her responsibilities and requirements as
a leader of his/her school. I understand that, if chosen, my son/of Further, I understand that school and/or personal insurance must receive medical attention in the event that I cannot be present of	daughter will be required to pay for dance camp and uniforms. It cover my son/daughter. I give permission for my child to
Signature of Parent/Legal Guardian	Date