

DR. SEUSS: OH, THE DANCES YOU'LL DANCE!

Cherry Creek Dance **Spring** Recital Sign-up Form
Sunday, June 17, 2012

SRD ___	FRD ___	
Code ___	Multi ___	
Paid ___	Payment	
Cash	CC	Check
Entered by _____		
___	___	___

*****VERY IMPORTANT!*****
***** ALL FIELDS MUST BE COMPLETED BY A PARENT*****

Each student must fill out a form and return it to the front desk. Please make sure that all information and measurements are completed before turning in your form. This form and the performance fees are due **no later than Sunday, January 29**. **Late registration will not be accepted.** All accounts must be paid in full before turning in this form.

___ **Yes**, I will participate in DR. SEUSS: OH, THE DANCES YOU'LL DANCE, [the 2012 spring recital](#)

Student's Name: _____

Class Numbers Student Will Perform (these #'s are found in the studio schedule):

****This is critical information!! Please make sure you are writing the correct class numbers****

Fri. & Sat. classes - 9:30 am show **Sun. & Thurs. classes - 12:15 pm show**
Tues. classes - 3:00 pm show **Mon. & Wed. classes - 5:45 pm show**

*Some classes are subject to a show change, please check with the front desk if you have questions

The cost for performing is **\$115** for the first class and **\$75** for each additional class.

Your total is: \$ _____

There are absolutely no refunds, no late registration, and no switching classes after sign-up. Please make sure you have read and understand all of the information. Accounts must be paid in full before recital date.

Signature of parent or guardian: _____ Phone #: _____

This box must be initialed in order for your dancer to participate:
_____ I understand that **no one will be excused early**. Only authorized volunteers are allowed backstage. Please understand that this is to ensure your child's safety.
_____ I understand that once my child is signed up for the recital, she/he cannot switch classes.

ALLERGY ALERT

_____ Please check this box if your child has a SEVERE allergy. If so, you will need to provide a guardian backstage.

Name _____ Class #'s _____, _____, _____, _____

SIZES & MEASUREMENTS

All of the costumes are ordered from different manufacturers who produce the merchandise "to order." This means that they make the sizes we order at the time they are ordered; they are not "in stock" items. Please allow for growth when choosing sizes. Remember that costumes will be ordered in **February and worn in June**. You know your child's growth pattern better than we do! We ask for measurements so that we can compare them to each manufacturer's general sizing charts. Costumes are non-refundable and non-exchangeable and extra costumes are not ordered. Any alterations will be your responsibility. We will have a seamstress available at the studio at posted times as soon as costumes are delivered.

MEASUREMENTS

BUST	WAIST	HIPS	INSEAM	OUTSEAM	GIRTH	HEIGHT	SIZE	TIGHTS 1-3, 4-5, 6-8, 12-14, ADULT A,B,C,D



BUST: Measure around the fullest part of the bust line.

WAIST: Measure around the smallest part of the waist.

HIPS: Measure around the fullest part of the hips, approximately 8" below the waist.

GIRTH: Measure in a circle from the shoulder at the neck, down under the fullest part of the bust, through the center of the crotch and up the back to the starting point at the shoulder.

INSEAM: Inside of crotch straight to the anklebone.

OUTSEAM: Outside of waist to the anklebone.

VOLUNTEERS NEEDED!

Parents, please let us know if you are able to help with the show in any way. We will contact you closer to the recital date to let you know where you will be working. Please keep in mind that you will only be able to watch the show you are helping with on the monitors downstairs. The more volunteers we have, the smoother the show runs! If you have friends, church groups, girl scouts, etc. who would be willing to help, they are more than welcome!

___ **Yes**, I can help with the ___ **9:30a.m.** ___ **12:15p.m.** ___ **3:00p.m.** ___ **5:45p.m.**

___ **Yes**, I can help with tasks leading up to the show