

Registration Form

Special Needs Dance Class

Please complete this form with as much detail as possible. This information will be used for our team to review as we prepare for your dancer. Let us know how we can make this a successful dance class for your child. We will do our best to include these elements in our teaching plans for your dancer.

Dancer's Name: _____ Age: _____ DOB: ____/____/____

Parent/Guardian Name: _____

Contact #: (____) ____ - ____ Email: _____

Emergency Contact Information: _____

Does your child have any allergies? Yes No

If yes, please explain: _____

What is your child's condition? Please check all that apply.

- Autism Spectrum Disorder
- Asperger Syndrome
- Attention-deficit Hyperactivity Disorder
- Blind or Visual Impairment
- Cerebral Palsy
- Down Syndrome
- Deaf or Hard of Hearing
- Developmentally Delayed
- Epilepsy or Seizure Disorder
- Learning Disability
- Mobility or Physical Impairment
- Neurological
- Processing Disorder
- Speech or Language Delayed

If other, please specify: _____



We encourage you to use this registration form at your studio, but ask that you please leave our logo on it.

Explain your child's diagnosis. Please be specific so we can prepare for his or her needs.

What activities does your son or daughter enjoy?

How do you encourage him or her to take part in a new event that he or she has not done before?

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

What are your child's positive triggers? Favorite songs?

What type, if any, noises, activities, or situations bother your child?

If your child gets overly bothered or irritated, how is this displayed?



What are some ways to help your direct his or her behavior?

If, as a last resort, discipline is needed, what works and what does not?

Are there any physical activities your child should not take part in?

Does your child require the use of a wheelchair? Walker? Braces?

Does anything on your child hurt to move? Do they have lack of mobility?

What is the best way to handle a medical emergency regarding your child?

Would your child do best with a buddy or assistant dancer? Yes No

Other helpful comments: _____



Policies and Procedures

Special Needs Dance Class

NOTICE OF NONDISCRIMINATION POLICY: Dancing for Donations does NOT discriminate on the basis of race, color, national and ethnic origin, ancestry, or disability and health-related conditions.

NOTICE OF CONFIDENTIALITY: Dancing for Donations is an all-inclusive program. We will NOT share your child(ren)'s personal/medical information or dance progress with any person, unless you have given permission for us to do so (e.g., physical therapist, occupational therapist, etc.). Dancing for Donations will also reach out to you if we feel it is in our best interest to request more information.

By registering my child, I understand...

It is expected that my child arrives AT LEAST 5-10 minutes prior to scheduled class time. This allows for him or her to prepare mentally and physically and also for his or her teacher to start class on time.

My child should wear comfortable clothing that allows for easy movement and bring ballet and tap shoes or socks. NO skirts or dresses should be worn unless there are shorts or pants underneath.

My child and I must show respect for the facility, dance equipment, teachers and volunteers.

I am REQUIRED to stay in the dance room or on premises AT ALL TIMES. I know my child better than his or her teacher and therefore, will be asked to step in if there is a need and/or issue of some kind.

Pictures and videos can be taken during the dance class to capture this special and memorable moment for my child. Dancing for Donations as well as the host location reserves the right to use ALL pictures and videos of students for advertising, social media, and promotional purposes of the studio.



We encourage you to use this registration form at your studio, but ask that you please leave our logo on it.

Parent Agreement

Special Needs Dance Class

By signing this form, you understand this agreement releases Dancing for Donations and its teachers, assistants, and volunteers from ALL liability relating to injuries that may occur during dance classes or activities hosted by Dancing for Donations or the host location/studio of the special needs dance class.

I _____ parent of _____ have read, understand, and agree to ALL of Dancing for Donations policies and procedures hereby stated above. I have also answered the questions on the registration with as much detail as possible the best I can.

Parent Signature: _____ Date: _____

Please discuss additional questions or concerns with Dancing for Donations teachers when it does not interfere with class. To contact Dancing for Donations, please email us at dance4donations@gmail.com



We encourage you to use this registration form at your studio, but ask that you please leave our logo on it.