

**Танцювальний Ансамбль “ОДЕСА”
ODESA UKRAINIAN DANCE ENSEMBLE OF SYRACUSE**

www.syrucc.org

Registration Form

Date: _____

Last Name: _____ **First Name:** _____ **DOB:** _____

_____ **DOB:** _____

Address/Адреса: _____ **DOB:** _____

(City) _____ (State) _____ (Zip Code) _____ **DOB:** _____

Email: (dancer) _____ **Cell phone/Text:** _____

Email: (parent) _____ **Cell phone/Text:** _____

Інші Телефони/ Additional Parent Phones: (home) _____ (work) _____

In case of emergency, call _____ **Relationship:** _____ **Phone:** _____

Алергія/My child has an allergy to: _____

CYM member: Yes _____ No _____ **Registration Paid:** _____

-or-

ODESA member only: Amount paid \$ _____

(Annual fee for non-CYM members: \$175/1 child/adult \$100/2+ children/adult)

We look forward to **your participation** in ODESA and UNH fundraisers for 2016/17.

I understand that the ODESA repertoire is for ODESA use exclusively. Do not post dances online.

Release: The ODESA Dance Ensemble is part of the Ukrainian-American Youth Association (CYM) and holds practices at the Ukrainian National Home. I do not hold any of the parties associated with these organizations responsible but assume full responsibility for my child(ren) during this time in case of any mishap.

Parent/Guardian Signature

Date

Form and payment due at time of registration. Check payable to ODESA.