

Registration 2018-2019

Last Name _____ First Name _____

Mailing Address _____ City _____ State _____ Zip _____

Birthdate _____ Age _____ Grade _____ School _____

Years Taken at the Dance Place _____ At Another School of Dance _____

Phone Numbers: Home _____ Cell Phones _____

Mother's Name _____ Phone (Daytime) _____ C W H

Father's Name _____ Phone (Daytime) _____ C W H

Email Address(es) _____

Additional people who are allowed to pick up your child from dance:

Name _____ Relationship to Child _____

Name _____ Relationship to Child _____

Billing Contact:

Name _____

Email _____ Phone _____

Billing Address _____ City _____ State _____ Zip _____

Payment Plan: Monthly Three Times a Year Once a Year

My child is interested in the following type(s) of dance classes:

Pre-ballet Ballet Pointe Modern Tap Liturgical Cecchetti

For Office Use Only: Tuition _____ Registration Paid: \$10 (before 7/1/18) \$20 (after 7/1/18)

Classes Enrolled _____