

# Mironova Classical Ballet Academy Registration Form 2024-25

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## REGISTRATION FORM

### STUDENT INFORMATION

Full Name \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Primary email \_\_\_\_\_

Gender F / M / other Age \_\_\_\_ Birthday \_\_\_\_\_ Name of school \_\_\_\_\_

Grade level \_\_\_\_\_

Please describe any medical condition that we should be aware of

\_\_\_\_\_  
\_\_\_\_\_

### PARENT INFORMATION

Name of Parent 1 Name \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Name of Parent 2 Name \_\_\_\_\_ Mobile Phone \_\_\_\_\_

### EMERGENCY CONTACT

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Family physician or pediatrician

\_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Medical Insurance Provider

\_\_\_\_\_ Policy ID # \_\_\_\_\_

### NEW STUDENT

Tell us about prior ballet experience

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How did you hear about Mironova Classical Ballet Academy?

Google / Yelp / Nextdoor / School / Instagram / Other \_\_\_\_\_

Referral (Who is your friend? \_\_\_\_\_ )

PLEASE READ AND INITIAL THE FOLLOWING:

\_\_\_\_\_ I understand that any physical activity involves the possibility of injury. I have consulted a doctor concerning any medical condition listed above. I accept full responsibility for any injury sustained during class or rehearsal and hereby waive, release and agree to hold harmless Mironova Classical Ballet Academy and its staff for any and all actions, claims and demands which may arise from my child's participation in any activity arrangement with the Mironova Classical Ballet Academy.

\_\_\_\_\_ I permit that photos taken of my child in class, rehearsal and performances may be used on Mironova Classical Ballet Academy promotion materials.

\_\_\_\_\_ I have read the Mironova Classical Ballet Academy Code of Conduct and Policies and I understand and accept it.

Please check your preferred payment method

Zelle® Elena Mironova (619) 718-2150

Check mailed, or handed in person

Cash handed in person

Parents must sign here. Your signature confirms that the information on this form is complete and correct. Thank you, and welcome to the Academy.

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_