



Student Enrollment for SAzCA Ballet Training Program

*Acceptance is based upon desire to dance!*

Please fill out and return with your tuition payment. Visit our website at [www.SAzCA.org](http://www.SAzCA.org) for more information!

Please fill-in all information clearly. Thank you!

Student Name:

Student DoB:    /    /

Name of Parent/Legal Guardian:

**CONTACT INFORMATION:** *[If student has more than one address please use reverse of page to complete all contact information, Thank you.]*

Mobile/Text/Voicemail:

Address:

City:

State:

Zip:

Email:

Additional Contact Information:

*(such as student/parent social media connection or other family contact information):*

Class enrollment info:

Level:

Payment Information:

Check/Cash:

Credit Card:

Exp.    /   

CVS:

Billing Zip:

PayPal/Square – Online/In-Person:

Other Info/:

Agreement of policies:    Y    |    N