2024-25 REGISTRATION FORM

Registration Fee -\$20.00 per child before 6/30; \$25.00 per child after $6/30 - \underline{non-refundable}$

Student's Name:				
Dance Sibling(s):				
Dance Sibling(s):				
Date of Birth:	Age:			
Mailing Address:		Zip:		
Parent/Guardian: 1:	Cell #:			
2:	Cell #:			
Home #:				
Parent/Guardian Email: (Required f	For monthly info)			
Student Cell Number & Email	&			
School Attending & Grade for 2024-2	&			
Number of Previous Years of Dance,	Tumbling, Aerial Training &	Studio:		
**This is my dancer'syear of dance. (Credits are accepted from other schools.)				
LIST ALL MEDICAL CONDITIONS:				
Emergency Contact Name & Nur	mber: (This is someone oth	er than parent or guardian. <i>)</i>		
Check all classes that you are interest	ted in; the final schedule and le	evels are determined by the faculty.		
PREFERRED DAYS/TIMES FOR CLASSES:				

We will do	our best	to take requests into o	consideration but there are no guarantees
Pre-school 1	(2 yrs. old	nths–24 months - 45 mir) - Tap, Pre-Ballet & Pro old) – Tap & Ballet	nutes) – Tap, Pre-Ballet & Pre-Acrobats e-Acrobats
Pre-school	3 (4/5 yrs.	old) – Tap & Ballet	
Combo 1 (5	5/6+ yrs. o	ld) – Tap & Ballet	
Combo 2 (6	6/7+ yrs. o	ld)– Tap & Ballet	
Combos 3-	7 (7/8+ yrs	s. old) Tap & Jazz	
INDIVIDUAL (CLASSES	:	
Ballet: (6+	yrs. old) _		
Pre-Pointe	e/Pointe: (9+ years old)	
Contempo	orary/Lyri	cal: (6+ yrs. old)	
Тар:	Teen (12+	years old) Adult (1	17+ years old)
Jazz:	_Teen (12+	years old) Adult ((17+ years old)
Jazz Begin	nner: (5-7	yrs. old – encouraged to	be enrolled in Tap & Ballet Combo)
Нір Нор:	(4+ yrs. o	ld)	
Tumbling	: (4+ yrs. c	old)	
Progressi	ions (ages	10+)	
Musical T	Theatre (a	ges 11+) Children	n's Musical Theatre (ages 7-10)
Hawaiian	n Classes:	(ages 6+)	
Stretch as	nd Condit	ioning: (4+ yrs.)	
Aerial Cla	asses: (7+	yrs. old) (\$50.00	per month, no discounts)
understand a stud signature page sta	lent informating I read	ation packet will be hande and understood all rules, i	n is complete and correct to the best of my knowledge. I d out at my child's first lesson. I agree to sign and return the regulations and financial responsibilities, or my child may not er to keep on file at the studio.
FOR OFFICE US	E ONLY:		Guardian Signature
Registration:	\$	Number of classes	
Monthly Tuition:	\$	Paid: \$	Guardian Signature