



Class Registration

Fill out the form carefully for registration

Student Name

First Name Middle Name Last Name

Student Name

First Name Middle Name Last Name

Student Name

First Name Middle Name Last Name

Birthdate

Month Day Year

Birthdate

Month Day Year

Birthdate

Month Day Year

Emergency Contact

First Name Last Name

Emergency Contact Phone Number

Please enter a valid phone number.

Parent or Guardian Phone Number

Please enter a valid phone number.

Parent E-mail

example@example.com

List of Classes

Hours of Class

Additional Classes

Dancer's T-shirt Size (Specify Youth or Adult size)

Address

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

