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### REGISTRATION FORM

Student Name (Please Print) \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Parent or Guardian Name \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_ Other \_\_\_\_\_

Emergency Contact:

Name/Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Student's Previous Dance Training \_\_\_\_\_

Class Date(s) Requested \_\_\_\_\_

If this student has any special physical, medicinal or emotional needs which would be affected by dance exercise, please describe here:

\_\_\_\_\_

All continuing and new student must register and pay the registration fee to guarantee a place in the requested class(es). Most are filled on a first-come first-serve basis. **No registration will be accepted if the student has an outstanding balance.**

I accept and understand that: each student is expected to comply with the studio rules, all classes have some dress code and footwear requirements, personal property is the sole responsibility of the students, and The Dance Studio is not responsible for injuries or accidents which occur while on the premises.

Signature of Parent/Authorized Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Please include \$10 registration fee with this form to validate student enrollment.**

For Office Use Only: School Year \_\_\_\_\_  
Paid \_\_\_\_\_ Date \_\_\_\_\_ QB# \_\_\_\_\_