

# School of Dance Arts

## REGISTRATION

Complete both sides for the 2011-2012 academic year

STUDENT \_\_\_\_\_

AGE \_\_\_\_\_ BIRTHDAY \_\_\_\_\_

SCHOOL \_\_\_\_\_ 2011-2012 GRADE \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK \_\_\_\_\_ CELL \_\_\_\_\_

EMAIL \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

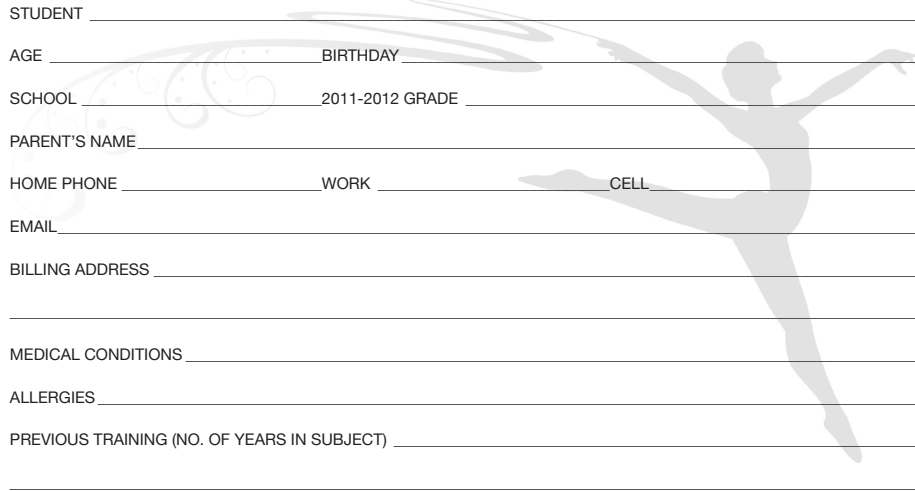
\_\_\_\_\_

MEDICAL CONDITIONS \_\_\_\_\_

ALLERGIES \_\_\_\_\_

PREVIOUS TRAINING (NO. OF YEARS IN SUBJECT) \_\_\_\_\_

\_\_\_\_\_



CIRCLE SUBJECT DESIRED & NUMBER OF CLASSES PER WEEK

| SUBJECT    | CLASSES PER WEEK |   |   |
|------------|------------------|---|---|
| BALLET     | 1                | 2 | 3 |
| TAP        | 1                | 2 | 3 |
| JAZZ       | 1                | 2 |   |
| HIP HOP    | 1                |   |   |
| CHEERDANCE | 1                |   |   |

What time is your child's school dismissed? \_\_\_\_\_

Earliest time your child can arrive? \_\_\_\_\_  
\*More availability for classes at an earlier time\*

Please list any day(s) **not** convenient \_\_\_\_\_

Please return this card and registration fee of \$20.00 to: The School of Dance Arts  
P.O. Box 3516  
Florence, SC 29502

**REGISTRATION FEE IS NON-REFUNDABLE**

FOR OFFICE USE ONLY

REG. FEE PAID \_\_\_\_\_ DATE ENROLLED \_\_\_\_\_