

For Stud	lio use	only	V :
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Reg. Fee Pd.	OnCK#	
Tuition paid	n Full or Monthly	
Ballet Class _		
Tap Class		
Jazz Class		

Momeofeler Aiken Onto Callet

Registration Form

Dancer's Name:	Age:	Birthday:
Parent's Name:		
Address:		
City:	State:	Zip:
Contacts: (Home)	Email:	
(Cell)	(Work)	
Emergency Contact Name:		
Emergency Contact Number(s)		
Known Allergies/Concerns:		
Years of Dance:		
Please Circle what dance classes you	are registering for	:
Tap	Ballet	Jazz
Will your child be coming from Mea	d Hall after school	care?
Will they be returning to Mead Hall	after school care af	ter dance class?
If your dancer is under the age of 11 allowed to pick your child up after the		other people that will be

We also would like to start posting more pictures of our students on our website as well as social media. We would like your permission to use any pictures that might be taken of your child on our website, Facebook page or Instagram. We will not publish any names when posting pictures.		
Yes, I will allow pictures of my child to be published.		
No, I would not allow pictures of my child to be published.		
Parent (guardian) Signature Date		