

Student's Name:			Nickname:			
Birthday:			Allergies:			
Primary Address:						
Parent/Guardian:		Phone:		_ E-mail:		
Parent/Guardian:		Phone:		_ E-mail:		
Emergency Contact:		Phone:		_ Relationship:_		
How did you hear ab	out us?					
	nication will be sent ion, we may use text livered to:				one you prefer th	ese
E-mail Address:			<u> </u>	\$		
	j 2022 Class Select		_	\$ \$	Monthly Tuition Tota Costume Deposit Costume Balance	al )
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