

# **JUNIOR ADMIRALS HOLIDAY DANCE CLINIC**

**DANCER'S NAME** \_\_\_\_\_

**DOB** \_\_\_\_\_ **GRADE** \_\_\_\_\_

**SCHOOL** \_\_\_\_\_

**PARENT/GUARDIAN** \_\_\_\_\_

**HOME PHONE** \_\_\_\_\_ **CELL PHONE** \_\_\_\_\_

**EMAIL** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**HOW DID YOU HEAR ABOUT OUR CLINIC** \_\_\_\_\_