



SUMMER 2019 CLASS REGISTRATION FORM

Participant: _____
Address: _____
City/State/Zip: _____
Home Phone: _____
Mother's Cell Phone: _____ Father's Cell Phone: _____
Mother's Email: _____
Father's Email: _____

Classes (check each desired):

- ___ Hip Hop Stunts Class (\$100 for 10 week session)
- ___ Ballet – 1 Class/Week (\$100 for 10 week session)
- ___ Ballet – 2 Classes/ Week (\$200 for 10 week session)
- ___ Tumbling Class (\$150 for 10 week session)
- ___ Tap Class (\$100 for 10 week session)
- ___ Mini Hip Hop Class (\$100 for 10 week session)

Total: _____

Payment Method: Check - _____ (#) Cash _____ Credit Card _____
Paypal _____

Allergies or special health conditions or restrictions:

Participant (if over 18) or Parent Signature

Date

- *Ensure a current Lucid Liability Waiver is completed and attached to this form.*