



BALLET CLASS REGISTRATION

Dancer: _____

Dancer email: _____

Birthdate: _____

School: _____

Circle Age Division (utilizing Age as of 8/31/18):

Youth
(Age 10-12)

Junior
(Age 13-15)

Senior
(Age 16-18)

Parent Name: _____

Parent Email: _____

Address: _____

Home Phone: _____

Parents Cell Phone Number: _____(mom) _____(dad)

Ballet Classes (check days to attend)	Monday	Wednesday
Session is 5 Weeks - Classes offered M/W 4:15-5:00		

1 Time per Week- \$50 (Total of 5 Classes)

2 Times per Week - \$100 (Total of 10 Classes)

Session 5 beginning November 12th
Payments are due by the first class.

For Studio Faculty Use Only:

Payment Type: _____

Number: _____

Date: _____