

## 2024-2025 Registration Form

\$25.00 New Family Registration Fee / \$20:00 Returning Families
Tuition Paid in Full or Monthly

		4 -	- 4 1		r		
<b>.</b> -	n	T2	CT I	ını	rorn	າatio	nn
u	OI.	LCU			IUIII	ICLLIV	

Dancer's Name:	Age:	DOB:
Parent's Name:		
Address:		
City: State: Zip:		
Contacts:(Primary) (Work)		
Email:		
Emergency Contact Name:		
Emergency Contact Number(s):		
Known Allergies/Concerns:	<del></del>	<del> </del>
Years of Dance:		
Classes		
Please circle what dance classes you are registering for:		
Creative Movement Pre-Ballet Ballet I, II,	, III, IV, V Pointe	
Jazz Jazz & Lyrical Tap Co	ontemporary	
Competition Team Ballet Ensemble Ail	ken Civic Ballet Compa	ny
Pick Up & After School Care  Will your child be coming from Mead Hall after school care?  Will they be returning to Mead Hall after school care after dance class  If your dancer is under the age of 11, please let us know other people after their dance class.	e that will be allowed to	pick up your child
Website & Social Media We also would like to post photos of students on our website and socuse any photos that might be taken of your child on our website, Face any names when posting pictures.		•
Yes, I will allow pictures of my child to be published. No, I will not allow pictures of my child to be published.		
I have read and agree to the studio's policies outlined under "Terms a	and Conditions". YES	NO
Parent/Guardian Signature	Date	<u> </u>