

Amyclae Dance Academy Registration Form

1. Parent/Guardian's Name:			
<i>2. Information already on file?</i>		<i>If yes, proceed to number 10.</i>	
<i>3. Street Address:</i>			
<i>4. City, State. ZIP Code:</i>			
<i>5. Home Phone Number:</i>		<i>6. Cell Phone:</i>	
<i>7. Email Address:</i>			
<i>8. Emergency Contact:</i>		<i>9. Emergency Phone:</i>	

10. Student's Name: <i>Use one registration form per child</i>			
<i>11. Birth date:</i>		<i>12. Age on September 1st (used to determine correct level)</i>	
<i>13. What type of dancing experience does student have?</i>		<i>14. How many years experience does student have?</i>	

Class Description	Level	Class Day	Class Time
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			

Office use only	Amount due: \$	Total # Hours per Week ?	Paid by ? Check / CC / Cash	Entered Reg Book? Staff Initial	Entered Online ? Staff Initial
Name of staff calculating amount?					