

REGISTRATION FORM

Separate Registration form required for each Student

Registration Fee (new student only): \$35



Student's Full Name: _____

Student's Age: _____ Current School Grade: _____

Please mark areas of interest:

Ballet-Beginner: ☐	Ballet-Intermediate: ☐	Ballet-Advanced: ☐
Hip Hop-Beginner: ☐	Hip Hop-Advanced: ☐	Country Line Dancing: ☐
Jazz: ☐	Tap-Advanced: ☐	Musical Theater: ☐
Wellness-Yoga: ☐	Wellness-Pilates: ☐	Wellness-Cardio Drumming: ☐
Art-Instruction: ☐	Art-Painting: ☐	Art-Special Events: ☐
Music-Lessons: ☐	Birthday Party: ☐	Other (please email us): ☐

Please list any previous Experience - Years and Where:

Parents/Guardians Responsible for Student:

Parent/Guardian Name: _____

Parent/Guardian Address: _____

City/State/Zip: _____

Phone/Cell: _____

Email: reminders/closings: _____

Billing Information:

Name of person responsible for Billing/Class Payment: _____

Email: (Billing/Invoice): _____

Billing Contact Number: _____

Parent/Guardian Signature: _____

New Student Fall Registration Fee: \$35 (waived if 2026/2076 lessons paid in full by 9/15/26)