Becky's School of Dance - Registration Fall 2011 to Spring 2012

Basic Info:

Dancer's Name: _____

D.O. B. _____Age:_____Entering Grade:_____

Contact Info:

Parent(s) Name:_____

Address: _____

City: _____State:_____Zip:_____

Phone: (daytime)_____(evening)_____

Cell Phone: _____(**will contact cell phone number first unless otherwise specified)

Email: _____

**You must email michelled@beckysschoolofdance.com if you wish to have automatic email announcements sent to you. You will not be automatically signed up for email alerts.

Emergency Contatct: **(Other than parent—will contact if parent is not available)**

Name:_____(Relationship)_____

Phone Number:_____Cell Number:_____

Name: _____(Relationship)_____

Phone Number: _____Cell Number:_____

Class Information:

Class 1:_____Day/Time_____Location_____

Class 2:_____Day/Time_____Location_____

Class 3:_____Day/Time_____Location_____

Payment Information: (Check One)

____Non-refundable Registration Fee $30/family

____Montly Tuition Rate: $_____/Month

____Discounted Tuition Rate for payment in full for entire season (10% discount) at $_____ for _____classes.

Special Notes:(check all that apply and last option)

_____text for cancellations rather than call

_____multiple dancer family

_____I have made Miss Becky aware of special concerns

_____I understand I must sign off on all other forms as they are given including handbook, contract and video/pic release