



STUDENT REGISTRATION FORM

2022–2023 Season

Classes Begin Tuesday, September 6th 2022

Student Information

Last Name: _____ First Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Date of Birth: _____ Age: _____

Parent Information

Mother's Name: _____
Home Phone: _____ Cell Phone: _____
Email: _____
Father's Name: _____
Home Phone: _____ Cell Phone: _____
Email: _____

Other Contact (in case of Emergency)

Name: _____ Relationship to the Child: _____ Phone: _____

Special Information

Please list any special conditions or allergies the studio should be aware. _____

What school district are you in: _____

PLEASE REGISTER MY CHILD FOR THE FOLLOWING CLASSES

CLASS	DAY	TIME	INSTRUCTOR	STUDIO	HOURS	Office Use
TOTAL HOURS						

Can't Find a Class that Fits Your Schedule or Age?

Ask us! The Class Schedule is
subject to change so please ask.

EMAIL US AT:
info@dancynstudio.com

OFFICE USE ONLY

TOTAL HRS PER WK: _____
YEARLY REG: \$50.00 _____
TOTAL: _____
CHECK: _____
ACH Form/Voided: _____
VOIDED CK: _____
POLICY FORM: _____