

Woodstock School of Ballet
Registration Form
2014-2015

Student's name _____ Age (as of Aug. 2014) _____

Birthdate _____ Grade (as Aug. 2014) _____

School _____

Parents' names _____

Mailing address: Street or P.O. Box _____

City _____ Zip _____

E-Mail address _____

Phone numbers:

Primary _____ Work/Mom _____ Cell/Mom _____

Work/Dad _____ Cell/Dad _____ Other _____

Name and number of anyone who has your permission to pick up your child on a regular basis (other than parent):

Name:

Phone:

Does your child have any physical limitations or medical problems that we should be made aware of? If so, please describe briefly, or write additional information on back:

FOR NEW STUDENTS ONLY: Has your child had any previous Dance training? If so, please describe:

REGISTRATION FEE.....There is a yearly registration fee of \$35 per family. This fee must accompany your registration form and is non-refundable. Please read, sign and date the Fee Agreement and return with this form.

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FOR OFFICE USE ONLY

Class Assignment _____

Fee paid _____ Check# _____ Cash _____