

FALL REGISTRATION
Classes start September 14th

Parents Name (Required) _____

*Please fill out if account information has changed or check the box if information is the same.

Same

Cell Phone _____ Email _____

Address _____

All dance classes (this does not include tumbling) will have a zoom option. Please check the box below if you would like the zoom option. You can opt out of zoom at any time and join class as long as there is space available. I would like to participate in zoom

Child's Name: _____ **D.O.B:** _____ **Age:** _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Child's Name: _____ **D.O.B:** _____ **Age:** _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Child's Name: _____ **D.O.B:** _____ **Age:** _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

