Ballet **TEN WEEK SESSION** Registration Form

Session 20: Thursdays March 12 – May 21, 2020 from 4:10 – 4:55p  
No class on April 9 during Spring Break  
Last class and showcase for families on May 21 at 4:10p  
**Ages 6 - 10**

Registration Fee: $100 – 10-week session, **scholarships & payment plans available**, tuition can be paid online. Dancer must be 6 years old at start of session.

Class Location: Robinson Terrace  
28652 NY-23, Stamford, NY

This class introduces young dancers to the practice of ballet, an important foundation for all dance forms. Students will learn basic exercises, turns, and floor combinations.

*A separate form is required for each child in family*

DANCE STUDENT NAME__________________________________________________________

BIRTHDATE__________________ AGE__________________ GRADE__________________

PARENT/GUARDIAN #1:

NAME______________________________________________

EMAIL ADDRESS: _________________________________

PHONE NUMBERS: HOME______________________________

WORK_________________________ CELL__________________________

MAILING ADDRESS:______________________________________________

__________________________________________________________

PARENT/GUARDIAN #2:

NAME:________________________________________________________________

EMAIL ADDRESS: ________________________________________________

PHONE NUMBERS: HOME______________________________

WORK_________________________ CELL__________________________

MAILING ADDRESS:______________________________________________

__________________________________________________________
EMERGENCY CONTACT #1:

NAME: ________________________________________________________________

RELATIONSHIP TO CHILD: ____________________________________________

EMAIL ADDRESS: ______________________________________________________

PHONE NUMBERS: HOME_______________________________________________

WORK_____________________________ CELL______________________________

EMERGENCY CONTACT #2:

NAME: ________________________________________________________________

RELATIONSHIP TO CHILD: ____________________________________________

EMAIL ADDRESS: ______________________________________________________

PHONE NUMBERS: HOME_______________________________________________

WORK_____________________________ CELL______________________________

As the parent/legal guardian, I understand the need for a prompt drop-off and pick-up. I will insure that my child is prepared for class, wearing the proper clothes for dance/movement. I have signed the parent/guardian release form.

_______________________  ______________  __________________________
AGREED TO BY (SIGNATURE)  RELATIONSHIP TO CHILD

________________________________
DATE

Office Note: Ballet 22