

# World Dance n Arts Registration Form

Student Full Name \_\_\_\_\_ Age \_\_\_\_\_

Birthdate \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Student # 2 Full Name \_\_\_\_\_ Age \_\_\_\_\_

Birthdate \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Primary Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Parent # 1 Name \_\_\_\_\_ Phone # \_\_\_\_\_

Parent # 2 Name \_\_\_\_\_ Phone # \_\_\_\_\_

E-mail Address (Used to send all WDA info.) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Relation \_\_\_\_\_

Emergency Contact Phone # \_\_\_\_\_

Any important medical concerns that we should know about? \_\_\_\_\_

Insurance Co. \_\_\_\_\_ Policy # \_\_\_\_\_

Previous Experience \_\_\_\_\_

Classes you would like? \_\_\_\_\_

(Circle)

**Days Preferred** = Mon Tues Wed Thurs Fri Sat Sun **Times Preferred** = 9am-10am-11am-12-1pm-2-3-4-5-6-7-8-9

(Circle)

How did you hear about us?

Newspaper, Drive by, Performance, Magazine, Yellow Pages, Online, Website, Friend Referral \_\_\_\_\_

Registration Date \_\_\_\_\_ First Class Date \_\_\_\_\_

First Months Tuition \$ \_\_\_\_\_ Start Month \_\_\_\_\_

Registration Fee +\$10.00

Total Amount Due \_\_\_\_\_ Payment Method \_\_\_\_\_

Monthly Tuition \$ \_\_\_\_\_

Classes Enrolled in \_\_\_\_\_

### Office Use Only

Reg. Fee \_\_\_\_\_

Policy \_\_\_\_\_

Mailbox \_\_\_\_\_

Roster \_\_\_\_\_

CL \_\_\_\_\_

CD \_\_\_\_\_

E-mail \_\_\_\_\_

Auto-Pay \_\_\_\_\_