

Company Registration 2010 – 2011

Dancers Information

Dancer's Name _____

D.O.B. _____

Age _____

Grade _____

Dancer's Email _____

Additional Information

Address _____

City _____ State _____ Zip _____

Mother Name _____

Work Phone _____

Cell Phone _____

Email _____

Father Name _____

Work Phone _____

Cell Phone _____

Email _____

Please check the following classes that you wish to take for the 2010-2011 season:

Ballet _____ (Required for ALL Company members)

Production _____ (Required for ALL Company members)

Tap _____

Jazz _____

Lyrical _____

Musical Theatre _____

Contemporary _____

Hip Hop _____

Vocal _____

Acro _____

Acting _____

My child would like to do a solo. Yes or No How Many _____

My child would like to do a duet/trio. Yes or No How Many _____

My child would like to do a small group. Yes or No How Many _____

\$30.00 Non-refundable fee for child and \$50.00 for families-

Check # _____ Credit Card _____ Date Paid _____