



46 Noxon Road, Poughkeepsie, NY 12603 845-849-2966

REGISTRATION FOR 2013 – 2014

STUDENT INFORMATION:

Name: (Last) _____ First _____ DOB _____

Age (as of September 1,2013) _____

Address _____

City _____ Zip _____

Phone(Home) _____

E-Mail _____

Emergency Contact (Name) _____

Emergency Contact (Phone) _____ (Relationship) _____

PARENT INFORMATION:

Mother(Name) _____

Phone (Home) _____ (Cell) _____ (Work) _____

E-mail _____

Father (Name) _____

Phone (Home) _____ (Cell) _____ (Work) _____

Registration Fee: \$25.00 \$ _____

Tuition Payment- Per Quarter (or Annual) \$ _____

TOTAL \$ _____

CLASS (Ballet, Modern, Irish, etc.)	Level	Day
1.		
3.		
4.		
5.		

Please SIGN and CIRCLE ONE: SELF PARENT GUARDIAN
