



STUDENT INFORMATION

Dancer's Name: _____

Parent's Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

E-mail: _____

EMERGENCY CONTACT INFORMATION

Name of Contact (other than parent named above): _____

Relation to Student: _____

Contact's Phone Number: _____

DANCE EXPERIENCE

Do you have any dance experience? _____

If so, how long did you dance? _____

What styles of dance? _____

Current School and Grade you are in: _____