



Studio Registration Form

There will be a one time registration fee of \$30.00 for any dancer who enrolls in classes at ADP

Dancers Full Name:

Age: Date of Birth Male ☐ Female ☐

Address:

City/State/Zip:

(if applicable please give the information below)

Dancer Cell Phone:

Dancer Email:

Years Of Training: (Please check below all genres that apply to training)

Ballet Jazz Lyrical Tap Hip Hop

Any other Comments of training experience:

Parent One's Name:

Address:

City/State/Zip

Home Phone: Cell Phone Work Phone

Email Address:

Parent Two's Names:

Address:

City/State/Zip

Home Phone: Cell Phone Work Phone

Email Address:

In Case of Emergency please contact: (Provide different number other than Parents)

Name: Cell Phone:

Relation to Dancer:

(Below This Line Office Use Only)

Trial Class Taken: Date:

Entering Class Date

Registration Payment Method: Check:

Tuition: Cash :

Total: Credit: