

Dance Dimensions

Registration Form

Child's Name: _____

Date of Birth: _____

Age: _____ **Grade (Fall 2020):** _____

Class Type (Circle):

Ballet	Tap	Tap & Ballet Combo	Acrobatics	All Boys Hip-Hop
Pointe	Jazz/Hip-Hop	Tap & Jazz Combo	Pom Dance	Jazz
Lyrical	Hip-Hop	Ballet & Lyrical Combo	Leaps / Jumps / Turns	

Class Days/Times Requested: _____

Parent Name: _____

Street Address: _____

City: _____ **Zip:** _____

Home Phone: _____

Cell Phone: _____

Email: _____