

Perna Dance Center

REGISTRATION APPLICATION (Please Print Clearly)

Registration Date: _____

Current Student **Summer Student**
 Former Student **New Student**

Student's Name: _____

Address: _____ **Town:** _____ **Zip:** _____

Parent's Name (if different than students'): _____

Parents' Profession or Occupation (optional): _____

Person Responsible for Payment (if not parent): _____

Would you be interested in being a Class Mother? Yes No

Birthdate: _____ **Age as of 10/31/16:** _____

School: _____ **Dismissal:** _____

Religious Ed (Day/Time): _____

Email: _____

*Please check **one box** to indicate which phone is best to call first. Whichever phone you pick will be listed as your main phone number.*

Home Phone: (____) _____
 Mother Cell: (____) _____
 Father Cell: (____) _____
 Student Cell: (____) _____

Best Class Day: _____ **Best Class Time:** _____ **Sat. Dance Class:** Yes No

Days & Times Not Available: _____

Carpool or Additional Requests: _____

Medical Issues / Restrictions/Other Notations (asthma, eyeglasses, etc.): _____

PLEASE INDICATE YOUR CHOICE OF CLASSES

Pre-School and Combo Classes for Ages 3-7

Dance & Play (ages 24 mos & up)
 Dancing Tots (age 3-4 for 1 hr)
 Kinderdance - Ballet & Tap Combo (age 4-5 for 1 hr)
 Combo I - Ballet & Tap Combo (age 5-6 for 1 hr)
 Combo IIA - Ballet & Tap Combo (age 6-7 for 1.5hrs)
 Combo IIB - Ballet & Jazz Combo (age 6-7 for 1.5hrs)
 Acro-Gym for Kids (age 5-7 for 1 hr)
 Funk Jazz for Kids (age 5-7 for 1 hr)
 Kids Hip Hop (age 5-7 for 1 hr)

Dance Class Offerings for ages 7 & up

Ballet (age 7 & up for 1 hr)
 Tap (age 7 & up for 1 hr)
 Jazz (age 7 & up for 1 hr)
 Hip Hop (age 7 & up for 1 hr)
 Acro-Gym (age 7 & up for 1 hr)
 Pre-Teen Combo Ballet/Jazz (age 8-11 for 1.5 hrs)
 Teen Combo Ballet/Jazz (age 12 & up for 1.5 hrs)
 Pointe (Ballet Required) (teacher recommendation)
 Modern/Contemp (Ballet Req) (age 12 & up for 1 hr)

New Students Only: How did you hear about us? _____

Years of training: _____ **Ballet** _____ **Tap** _____ **Jazz** _____ **Acro** _____ **Hip Hop** _____ **Other** _____

Name of Previous Studio _____ **City & State** _____

I agree to the terms of enrollment to the Perna Dance Center which include a non-refundable Registration Fee and monthly tuition payments due by the 1st of each month. If you choose to discontinue classes, your last tuition payment is refundable until 10/31/16 upon written notification of withdrawal from studio. Performers/students automatically grant the Perna Dance Center permission to use photos or videotape for advertising and publicity purposes inclusive of television, videotape, film broadcast, social media, newspaper or print ads or website. No monetary compensation will be made and, due to editing, the material used is at the discretion of the Perna Dance Center. I give my permission to the Perna Dance Center to seek emergency medical attention for my child if necessary.

_____ **Parent/Guardian Signature** _____ **Date** _____