



**Mission of the Dance Institute: to foster talent by providing a comprehensive classical and contemporary training curriculum focused on the demands of a professional dance career.**

## YOUNG CHILDREN'S DIVISION REGISTRATION FORM 2009-2010

### STUDENT INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Class \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_ Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_  
Academic School \_\_\_\_\_ City/District \_\_\_\_\_ Grade \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION

Parent/Guardian #1 \_\_\_\_\_ #2 \_\_\_\_\_  
Address #1 \_\_\_\_\_ #2 \_\_\_\_\_  
(if different) \_\_\_\_\_  
Home phones #1 \_\_\_\_\_ #2 \_\_\_\_\_  
Office phones #1 \_\_\_\_\_ #2 \_\_\_\_\_  
Cell phones #1 \_\_\_\_\_ #2 \_\_\_\_\_  
E-Mail Address #1 \_\_\_\_\_ #2 \_\_\_\_\_  
Occupations #1 \_\_\_\_\_ #2 \_\_\_\_\_  
Employer #1 \_\_\_\_\_ #2 \_\_\_\_\_

### BILLING INFORMATION

Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_ Office Phone (\_\_\_\_) \_\_\_\_\_

### EMERGENCY CONTACTS (to be called only in the event that we are unable to reach a parent)

Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Does this student have any preexisting medical conditions or problems? If yes, please explain \_\_\_\_\_

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**GENERAL INFORMATION**

How did you hear of the Dance Institute? \_\_\_\_\_

Local Newspaper \_\_\_\_\_

Would you like to be included in a carpool listing?            YES            NO

**PLEASE PRINT CAREFULLY THE WAY YOU WOULD LIKE THE STUDENTS FIRST AND LAST NAME TO APPEAR IN THE PERFORMANCE PROGRAMS:**

\_\_\_\_\_  
\_\_\_\_\_

Plases return this registration form and other forms to the school office. Use the checklist below to assure you've completed all forms necessary for enrollment.

- |                          |                                  |                          |                             |
|--------------------------|----------------------------------|--------------------------|-----------------------------|
| <input type="checkbox"/> | 09-10 YCD Registration Form      | <input type="checkbox"/> | Student Handbook            |
| <input type="checkbox"/> | Release and Indemnification Form | <input type="checkbox"/> | Tuition Payment Contract    |
| <input type="checkbox"/> | Family Commitment Contract       | <input type="checkbox"/> | Student Commitment Contract |

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**PARENT/GUARDIAN'S SIGNATURE**

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**DATE**