

REGISTRATION FORM – DANCE AARTS ACADEMY

CHILDREN'S INFORMATION:

CHILD 1 NAME _____

AGE _____ BIRTHDAY _____

TECHNIQUE CLASS CHOICES: (Please list class level and day of the week)

CHILD 2 NAME _____

AGE _____ BIRTHDAY _____

TECHNIQUE CLASS CHOICES: (Please list class level and day of the week)

CHILD 3 NAME _____

AGE _____ BIRTHDAY _____

TECHNIQUE CLASS CHOICES: (Please list class level and day of the week)

PARENTS INFORMATION:

PARENT NAME _____

HOME TELEPHONE _____ CELL _____

MAILING ADDRESS STREET _____ PO BOX _____

CITY _____ POSTAL CODE _____

EMAIL ADDRESS _____ (Please print clearly)

COMPETITIVE CHOICES**GROUPS:**

COMPETITIVE GROUP	CHILD 1	CHILD 2	CHILD 3
Primary Group			
Jun. 1 Ballet Group			
Jun. 1 Jazz Group			
Jun. 2 Ballet Group			
Jun. 2 Jazz Group			
Jun. 3/Interm. 1 Ballet Group			
Jun. 3/Interm. 1 Jazz Group			
Jun. 3/Interm. 1 Musical Th. Group			
Jun. 5 Ballet Group			
Jun/Interm. Hip Hop Group (Beg)			
Interm. 3 Jazz Group			
Interm. 3 Lyrical Group			
Interm. Musical Theatre Group			
Interm. Hip Hop Group			
Adv. Jazz Group			
Interm. /Sennior Ballet Group			
Acro Group			
Large Group Jazz – Interm. & Up			
Large Group Lyrical – Interm. & Up			
Production – Gr. 1 & Up			
Stretch – Junior			
Stretch – Interm./Sen			

SOLOS:

SOLO STYLE	CHILD 1	CHILD 2	CHILD 3
Ballet			
Tap			
Jazz			
Lyrical/Contemporary			
Acro			
Musical Theatre			
Pointe			
Hip Hop			

DUET/TRIOS:

DUET/TRIO STYLE	CHILD 1 with	CHILD 2 with	CHILD 3 with
Ballet			
Tap			
Jazz			
Lyrical/Contemporary			
Acro			
Musical Theatre			
Pointe			
Hip Hop			