



theater - dance - workshops - concerts - art exhibitions - youth activities - festivals

Post Office Box 93, Roxbury, NY 12474
1.607.326.7908 info@roxburyartsgroup.org

2012 Dance Class Registration Form

Please fill out a separate form for each child - All classes are \$50. for a 5 week session to be paid in full by first day of class

CLASS NAME: _____

TODAY'S DATE: _____

CHILD'S NAME: _____

AGE _____ Grade _____

PARENT 1 CONTACT INFORMATION:

Name: _____

Phone: Home _____

Work _____

Cell _____

Email: _____

MAILING ADDRESS: _____

PARENT 2 CONTACT INFORMATION:

Name: _____

Phone: Home _____

Work _____

Cell _____

Email: _____

EMERGENCY PHONE NUMBERS: _____

As the parent/legal guardian, I understand the need for a prompt drop-off and pick-up. I will insure that my child is prepared for class, wearing the proper clothes for dance/movement. I have signed the parent/guardian release form.

AGREED TO BY: _____

RELATIONSHIP TO CHILD: _____