

Fall Registration 2011-2012



Parent or Guardian Name(s): _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Monthly Payment Option V/MC Cash/Chk

Mother's Cell: _____ Father's Cell: _____

Email address: _____

WESTSIDE
Dance
ACADEMY

Student Name: _____ Age: _____ Date of Birth: _____

Allergies: _____ Years of Dance _____ Gender _____

School District _____ Grade for 2011-2012 _____

Classes

Day	Time	Class / Level ***	Minutes	Recital Participation
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____


Pointe/Ballet/Tap/Jazz


***Level 5 classes and above, check all that you are participating in.

P B T J

* Additional Technique class required for all pointe dancers.

**Please use back for additional students or classes. Please check here if using back. _____

 There is a one-time, non-refundable registration fee of \$25.00 for all students that are new to Westside Dance Academy.

 There is an \$85.00 recital fee per student after June 10th (\$200.00 family maximum) due with fall enrollment.

 Tuition payments will be collected **August-April** and is due the first day of class each month. We accept Visa/ MC, or check.

FOR OFFICE USE ONLY: Automatic _____ Recital _____ Invoiced _____ Payment _____

125 NE Dartmoor Drive Waukegan IA 50263 515-987-1531 www.westsidedanceia.com

Student Name: _____ Age: _____ Date of Birth: _____

Allergies: _____ Years of Dance _____ Gender _____

School District _____ Grade for 2010-2011 _____

Classes

Day	Time	Class / Level ***	Minutes	Recital Participation
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Pointe/Ballet/Tap/Jazz

***Level 5 classes and above, check all that you are participating in.

P B T J

*Additional Technique class required for all pointe dancers.

Student Name: _____ Age: _____ Date of Birth: _____

Allergies: _____ Years of Dance _____ Gender _____

School District _____ Grade for 2010-2011 _____

Classes

Day	Time	Class / Level ***	Minutes	Recital Participation
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Pointe/Ballet/Tap/Jazz

***Level 5 classes and above, check all that you are participating in.

P B T J

*Additional Technique class required for all pointe dancers.