

# SUMMER 2016 REGISTRATION FORM

## Metuchen Dance Centre Registration Card

Registration Date: \_\_\_\_\_

Returning student? Y or N    Year started \_\_\_\_\_

Student Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_ Gender: F / M (please circle)

E-mail(s): \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work #: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work#: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone: 1. \_\_\_\_\_

Emergency Contact Phone: 2. \_\_\_\_\_

Emerg. Contact Relationship: \_\_\_\_\_

Student Physical Disabilities, Allergies, etc.: \_\_\_\_\_ Referred by: \_\_\_\_\_

Class Description	Day of Class	Time of Class	Duration of class	Office Use Only		Class #
				4 weeks	6 weeks	

Notes: \_\_\_\_\_

**For office use only**

**Individual      Family**

Total # hours per week: \_\_\_\_\_ # hours: \_\_\_\_\_

Total # classes per week: \_\_\_\_\_ # classes: \_\_\_\_\_

Duration:      4 weeks \$ \_\_\_\_\_ or 6 weeks: \$ \_\_\_\_\_

Registration Fee: \$ \_\_\_\_\_ (waived for 2015-16 students)

Date paid: \_\_\_\_\_

Check #/Cash: \_\_\_\_\_

Amount paid: \$ \_\_\_\_\_

Balance due (if any): \$ \_\_\_\_\_

Boutique order? Y or N \$ \_\_\_\_\_