

Ina Dance & Fitness Registration Form

New Student
Registration Fee \$35

Returning Student
Re-entry Fee \$40

Student/Family Information Please Print Clearly

Name of Student _____ Age _____ Date of Birth _____

Name of Student _____ Age _____ Date of Birth _____

Name of Student _____ Age _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Email Address (Please Print Clearly) _____

Home Phone _____ Cell Phone _____

Name of Parent/Guardian _____

Emergency Contact _____ Phone _____

Other than parent or guardian

General Information

Has the student had any previous dance experience? Yes No

If yes, what type of dance?

How long? _____ Where? _____

Does student have any health concerns we should know about? (Allergies, Asthma, Diabetes, Etc.)

If yes, please explain _____

Class/Tuition Information

Class desired _____ Day/Time _____

Class desired _____ Day/Time _____

Class desired _____ Day/Time _____

Monthly Tuition \$ _____ Registration/Re-entry fee \$ _____ Amount Paid \$ _____

Student/Parent/Guardian Signature

Please read our studio Policies & Guidelines.

By signing this registration contract, you agree to the Policies and Guidelines of our studio, and you also agree to pay the total tuition and registration amount.

Signature _____ Date _____