FOCUS Dance Center - July 9th, 2018 - June 15th, 2019

Registration Form for Individual Dancer

STUDENT	PARENT/LEGAL GUARDIAN
First Name: _____	**First Name:** _____
Last Name: _____	**Last Name:** _____
Street: _____	**Street:** _____
City: _____	**City:** _____
State: _____ **Zip:** _____	**State:** _____ **Zip:** _____
Home Phone: ( ) _____	**Home Phone:** ( ) _____
Cell Phone: ( ) _____	**Mom Cell Phone:** ( ) _____
Male/Female: _____ **D.O.B.** _____ **Age:** _____	**Dad Cell Phone:** ( ) _____
School/Grade: _____ / _____	**E-mail:** _____

We use email as our primary method of contact, please be sure to include an address so important information can find you. Rest assured, your email address, as with all of your information, is used for FDC purposes only.

HEALTH ISSUES:

Are you a NEW student or RETURNING student? Please circle one.... NEW or RETURNING

How did you hear about us? Facebook ☐ Friend ☐ Instagram ☐ Home/Charter School ☐

OC Family Magazine ☐ Online Search ☐ Walk By ☐ Other _____

CLASS	DAY	TIME	INSTRUCTOR	HOURS	OFFICE USE ONLY ASSESS	OFFICE USE ONLY WAIT LIST
				Total Hours		

I have received a copy of, and agree to, FOCUS Dance Center Policy and Procedures.

Sign: **Date:**

OFFICE USE ONLY

Reg Fee:	$	Cash Receipt #_____	Amount Paid _____
Monthly:	$	Check # _____	Amount Paid _____
Discount/Pre Paid:	$	Credit Card Authorization Form ☐	Amount Paid _____
Due Today:	$	Sibling: _____	
Sibling? ☐		Page _____ of _____ (List payment info on page 1)	

Rcvd By:_____
Date Rcvd:_____
Entered DW:_____
Date Entered:_____