



# FOCUS Dance Center Virtual Class Access Form

Date submitted: \_\_\_\_\_

Dancer Name: \_\_\_\_\_

Parent Name (if applicable): \_\_\_\_\_

Primary Email Address: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

Class Date	Class	Day	Time	Instructor
<input type="checkbox"/> Drop-In(s)	<input type="checkbox"/> Make-Up(s)	<input type="checkbox"/> Adult Card Drop-In(s)	<input type="checkbox"/> ClassPass	<input type="checkbox"/> Unlimited <input type="checkbox"/> Holiday Voucher*(s)
For Drop-In(s) and Make-Up(s) check one: <input type="checkbox"/> VIRTUAL   <input type="checkbox"/> INDOOR   <input type="checkbox"/> OUTDOOR				*Which holiday and year issued: _____

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**A minimum of 12 hours, from the time of submission, is required to process your request.** When completed, please email form to [connect@focusdance.com](mailto:connect@focusdance.com). **Once your request and payment (when applicable) has been processed you will be emailed a link for virtual class prior to start of class to grant you access.** As a courtesy to the class in progress wrapping up, please log in no more than 5 minutes before the start of your class. **Space is limited for outdoor or indoor classes. Your request will be reviewed and you will receive an email confirmation of available space.** Thank you.

For FDC Office Use Only

Date Requested: \_\_\_\_\_ DW Acct.#: \_\_\_\_\_ Received by: \_\_\_\_\_  
Link sent: \_\_\_\_\_