

Ovations

DANCE STUDIO

Phone: 856-833-0022

Fax: 856-833-0021

Web: OvationDanceStudios.com

2009-2010 Dance Season

Student #1:

Student's Name:

New Student: Returning Student: If returning, skip to show info.

Nick Name: SEX:

DOB: Age as of Sept 2009:

Total # of Years of Dance:

List Studio: # of Years:

List Studio: # of Years:

Spring Show Information:

Should this dancer be receiving a dance award this year?

No: ___ Yes: ___ 5yr 10 yr 15 yr other: _____

What size stockings would you like ordered for the show?

Child: 2-4 4-6 6x-7 8-10 12-14

Adult: A B C D

Total # of classes enrolled:

LAST NAME:

E-mail #1:

E-mail #2:

E-mail #3:

How would you like to receive studio updates:

E-mail: Hard copy*: Both:

* Those opting for hard copies will need to check their envelope in the lobby every week for updates. All corrections to updates will be posted on the bulletin board. It is your responsibility to check both weekly.

NEW STUDENTS ONLY OR INFORMATION CHANGED

Guardian (s) Name(s):

Relation:

Address:

City: State: ZIP:

Home Phone: Relation:

Cell Phone: Relation:

Emergency #: Relation:

How did you hear about Ovations?

OFFICE USE ONLY

FAMILY TALLY:

Total number of dancers in the family:

Total number of classes:

FULL YEAR PAYMENT DISCOUNT INFORMATIONS

TOTAL: \$

10% - \$

NEW TOTAL: \$

Performance Fee(s): + \$

GRAND TOTAL: \$

DOES NOT INCLUDE COSTUMES

Sorry, credit cards cannot be used for full year discount payments.

Registration Fees: Price each

Registration Fee Individual \$10.00

Registration Fee Family \$15.00

Tuition Fees: Payments due Aug., Nov. & Feb.:

Trimester fee \$

Monthly = \$ 9 payments total

Payments start June 1st

TOTAL: \$

Office Use Only:

Student #2

Student's Name:

New Student: Returning Student: If returning, skip to show info.

Nick Name: SEX:

DOB: Age as of Sept 2009:

Total # of Years of Dance:

List Studio: # of Years:

List Studio: # of Years:

Spring Show Information:

Should this dancer be receiving a dance award this year?

No: ___ Yes: ___ 5yr 10 yr 15 yr other: _____

What size stockings would you like ordered for the show?

Child: 2-4 4-6 6x-7 8-10 12-14

Adult: A B C D

Total # of classes enrolled:

Student #3:

Student's Name:

New Student: Returning Student: If returning, skip to show info.

Nick Name: SEX:

DOB: Age as of Sept 2009:

Total # of Years of Dance:

List Studio: # of Years:

List Studio: # of Years:

Spring Show Information:

Should this dancer be receiving a dance award this year?

No: ___ Yes: ___ 5yr 10 yr 15 yr other: _____

What size stockings would you like ordered for the show?

Child: 2-4 4-6 6x-7 8-10 12-14

Adult: A B C D

Total # of classes enrolled:

Student #5:

Student's Name:

New Student: Returning Student: If returning, skip to show info.

Nick Name: SEX:

DOB: Age as of Sept 2009:

Total # of Years of Dance:

List Studio: # of Years:

List Studio: # of Years:

Spring Show Information:

Should this dancer be receiving a dance award this year?

No: ___ Yes: ___ 5yr 10 yr 15 yr other: _____

What size stockings would you like ordered for the show?

Child: 2-4 4-6 6x-7 8-10 12-14

Adult: A B C D

Total # of classes enrolled:

Student #4:

Student's Name:

New Student: Returning Student: If returning, skip to show info.

Nick Name: SEX:

DOB: Age as of Sept 2009:

Total # of Years of Dance:

List Studio: # of Years:

List Studio: # of Years:

Spring Show Information:

Should this dancer be receiving a dance award this year?

No: ___ Yes: ___ 5yr 10 yr 15 yr other: _____

What size stockings would you like ordered for the show?

Child: 2-4 4-6 6x-7 8-10 12-14

Adult: A B C D

Total # of classes enrolled: