

# Lake Erie Ballet – Lake Erie Academy of Dance

## Student Registration

Please print all information – Parent/Guardian signature required if student is under the age of 18.

### Student Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address: \_\_\_\_\_

Allergies/Medical Information: \_\_\_\_\_

Student email: \_\_\_\_\_

### Parent/Guardian information

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

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

Whom should we contact in case of emergency? \_\_\_\_\_

Would you like to receive text alerts? NO YES Mobile number: \_\_\_\_\_

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

### Students Dance Experience

How many years of previous dance experience does the student have? \_\_\_\_\_

Where has the student received training? \_\_\_\_\_

What styles of dance has the student taken in the past? \_\_\_\_\_

What styles of dance is the student most interested in? \_\_\_\_\_

Please list any performance experience the student has had: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the student interested in learning more about the additional training and performance opportunities offered through the Sr & Jr Company? \_\_\_\_\_

### School Office Use

Date enrolled: \_\_\_\_/\_\_\_\_/\_\_\_\_ Placement: \_\_\_\_\_

Company: YES NO

Tuition: \_\_\_\_\_ Date entered in World Pay: \_\_\_\_/\_\_\_\_/\_\_\_\_

Bill Cycle: 1<sup>st</sup> 15<sup>th</sup>