

**DANCE FANTASIES REGISTRATION FORM  
2017-2018**

For registration to be complete, this form must be returned with the \$30 Non-Refundable Registration Fee. This will also confirm your ticket sale number for the 2018 Recital. Remember to register at the same time as family & friends or your ticket sale number will be different. ***Thank you for your prompt registration.***

PLEASE PRINT ALL INFORMATION CLEARLY

CHILD'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ DOB: \_\_\_\_\_  
as of 9/1/2017

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as of 9/1/2017

CHILD'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ DOB: \_\_\_\_\_  
as of 9/1/2017

**CONTACT/FAMILY INFORMATION**

**Mother:** \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
**Please place \* next to preferred contact #**  
Home #: \_\_\_\_\_  
Cel#: \_\_\_\_\_  
Work #: \_\_\_\_\_  
Email: \_\_\_\_\_

**Father:** \_\_\_\_\_  
Address: \_\_\_\_\_  
(If different from mother)  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
**Please place \* next to preferred contact #**  
Home #: \_\_\_\_\_  
Cel#: \_\_\_\_\_  
Work #: \_\_\_\_\_  
Email: \_\_\_\_\_

**Guardian:** \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
**Please place \* next to preferred contact #**  
Home #: \_\_\_\_\_  
Cel#: \_\_\_\_\_  
Work #: \_\_\_\_\_  
Email: \_\_\_\_\_

**STUDENT CONTACT INFORMATION**

Cel#: \_\_\_\_\_  
Email: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Phone#: \_\_\_\_\_

For the safety & concern of your child, please indicate any medical or parental custody issues that would help us to take proper precaution.

**CURRICULUM (Please check choices):**

Ballet  
 Tap  
 Jazz  
 TumbleDance  
 Lyrical \*\*  
 Pointe \*\*

\*\* Dancer MUST meet specific requirements and be chosen by director to participate in this class.

**AGE 3-4 and 5-6 ONLY**  
(Please choose preferred session)

Saturday Morning  
 Weekday Morning  
 Weekday Afternoon

Tuesday  
 Wednesday  
 Thursday

Please keep in mind, class may not be held at day/time requested.

<b>**Mailing Address**</b> 145 Myrtle Avenue Ansonia, CT 06401	Please make checks payable to: <b>Dance Fantasies Dance Studio</b>	Studio Address: 163 Main Street Derby, CT 06418
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