

Eleone DANCE UNLIMITED
 2019-2020 Dance Season
 REGISTRATION APPLICATION

PLEASE PRINT CLEARLY

Registration Date: _____

Dancer's Information:

Full Name	Age	Date of Birth	Gender
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Current Home Address	City	State	Zip
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Parents/Guardians' / Adult Student Information: (needed if dancer is under 18 years old)

Parent/Guardian Full Name	Full E-Mail Address
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Home Telephone Number	Cell Phone Number
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Emergency Contact Information:

Full Name (please print)	Relationship to the Dancer	Cell and Home Numbers
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Dance Experience:

Name and Location of Current Dance School(s)

How Many Years of Training	Dance Genres Studied	T-Shirt Size (S,M,L, XL)
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Medical Information:

Any Medical Problems or Allergies

List All Medications being taken (if any)

ALL FEES ARE NON-REFUNDABLE & NON-TRANSFERABLE

FOR STAFF ONLY TO COMPLETE

Registration Fee Paid	Total Number of Classes	Total Weekly Tuition	Total Costume Fee
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Classes	Day/Time