## **Dance With Mara 2024-25 Registration Form**

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Student's Name	Date of Birth	School Grade	New?
Does your child have any allergies, medica	l conditions or phys	ical limitations?	
Classes you wish to register your child,	/children in:		
Student's Name	Class	Day/Time	
Home Address:			
Emergency contact: name & number:			
Mother's name & cell number:			
Father's name & cell number:			
Email Address (for studio emails):			
Payment Me  • Full Payment: Sept 1 <sup>st</sup> , 2024  • 3 Payments: Sept 1 <sup>st</sup> 2024, Dec  • 7 Monthly Payments: Sept 1 <sup>st</sup> 2  *A \$50 costume deposit (per class)	2024 to March 1 <sup>st</sup> 2	ch 1 <sup>st</sup> 2025 025	ent.
For Office Use: (any	additional details on	back of form)	
Cinala Onos Complete Degistration On	Incomplete Decist	nation	
Circle One: Complete Registration Or Total Tuition Paid:			
Total Tultion Paid:	Receipt Numb	er:	
Гotal Costume Deposit paid:	Payment meth	od:	
NOTES:			
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