

Student's Name \_\_\_\_\_ Age \_\_\_\_\_ Grade Entering \_\_\_\_\_

Academic School 2019-2020 \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mother's Cell Phone \_\_\_\_\_ Father's Cell Phone \_\_\_\_\_ Dancer's Cell Phone \_\_\_\_\_

Home Phone \_\_\_\_\_ Dance Class(es) \_\_\_\_\_

Mother's Email \_\_\_\_\_ Father's Email \_\_\_\_\_ Dancer's Email \_\_\_\_\_

Mother's name \_\_\_\_\_ Place of Employment \_\_\_\_\_ Phone \_\_\_\_\_

Father's name \_\_\_\_\_ Place of Employment \_\_\_\_\_ Phone \_\_\_\_\_

Enclose payment (payable to Alabama Dance Theatre): \$ \_\_\_\_\_ tuition  
\$ \_\_\_\_\_ Annual registration fee -- Payable August 1st - \$40

Mail to: Alabama Dance Theatre  
Attention: Registrar  
1018 Madison Avenue  
Montgomery, AL 36104

I have read and understand the schedule, policy and payment terms herein.

\_\_\_\_\_  
Parent or Guardian's Signature