

MAPLE VALLEY SCHOOL OF BALLET

Class Registration 2010/11

New students please fill out completely.

Returning students please fill out fields with an asterisk, as well as any information that may need to be updated.

*Students Name _____

*Age _____ *Birth Date ____/____/____

Home Phone _____

Mother's name _____

Mother's work phone _____ cell phone _____

Email Address _____

Father's name _____

Father's work phone _____ cell phone _____

Email Address _____

Mailing Address _____

Street/ PO Box _____ City _____ Zip _____

Emergency contact Name _____ Phone _____

Health concerns _____

*I consent to allow images of my child to be used for promotional purposes
(website, recital posters, print ads, etc.) Yes No

*Signature of Parent / Guardian _____ Date: _____

Please mail completed and signed registration form and a check for the first month's payment to:

Maple Valley School of Ballet
PO Box 1408
Maple Valley WA 98038

Please circle what classes you are registering for.

Creative Ballet--Monday Morning	Level 1	Modern A
Creative Ballet--Tuesday Afternoon	Level 2	Modern B
Creative Ballet--Wednesday Afternoon	Level 3	Composition
Pre Ballet A	Level 4	Nutcracker
Pre Ballet B	Level 5	