

cary ballet conservatory

2011-2012 registration form

Non-Refundable Annual Registration Fee - \$30 (additional family members \$15 each)

Please PRINT clearly

Parent 1: _____
First Last

Address: _____
Street

City State Zip

Home Phone	()	Mobile	()
Work Phone	()	E mail	

Parent 2: _____
First Last

Home Phone	()	Mobile	()
Work Phone	()	E mail	

Student 1 Information

1. Name _____ School _____ Grade _____
 Age _____ Birth Date _____ Medical Condition? _____
MM/DD/YY

Classes	Day	Time	2 nd Choice	Office use	Tuition

Student 2 Information

2. Name _____ School _____ Grade _____
 Age _____ Birth Date _____ Medical Condition? _____
MM/DD/YY

Classes	Day	Time	2 nd Choice	Office use	Tuition

I give permission for my child to be recognized in CBC related photographs, newspaper articles, ad's, videos, website, etc.

Signature: _____ Date: _____

Comments: _____

I have read the tuition policy and agree to the terms described.

Signature: _____ Date: _____

Last Name:

Student(s):