

registration

Detach completed form and return with \$25 (per student) registration fee and first month's tuition. Class sizes are limited, so early registration is recommended.

Ballet Pensacola
 400 South Jefferson Street
 Pensacola, Florida 32502
 p: 850.432.9546
 f: 850.432.3297
 www.balletpensacola.com

Your support is essential to the success of Ballet Pensacola. Please consider making a donation in honor of your student.

- Please accept the enclosed cash or check in the amount of \$___ as a donation.
- Please charge my credit card \$___ for a donation.
- Please automatically charge my credit card \$___ each month for a donation.



Student's Name _____ Age _____ Birthdate _____
 Address _____ City _____ Zip _____
 Home Phone _____ E-mail _____
 School _____ Grade _____
 Mother's Name _____ Cell Phone _____
 Address (if different from student) _____
 Place of Employment _____
 E-mail _____ Work Phone _____
 Father's Name _____ Cell Phone _____
 Address (if different from student) _____
 Place of Employment _____
 E-mail _____ Work Phone _____
 Grandparents' Names _____
 Address _____ City _____ Zip _____

Are you a New or Returning Student?

If new, how much previous dance training have you had?

Number of years _____ Classes per week _____ Studio _____

I would like to register for:

Class _____	Day _____	Time _____	Fee _____
Class _____	Day _____	Time _____	Fee _____
Class _____	Day _____	Time _____	Fee _____
Class _____	Day _____	Time _____	Fee _____

Method of Payment

Include first month's tuition plus \$25 (per student) registration fee.

- Enclosed check or money order \$ _____
- Please charge my credit card \$ _____
- Please automatically charge my credit card \$ _____ each month for tuition.

If using a credit card for payment of tuition or a donation, please complete the information below.

Visa MasterCard Exp. Date _____
 Account No. _____ Three-Digit Security Code _____
 Authorized Cardholder Signature _____