N.y. Enrichment Classes: 2018-2019 School Year

REGISTRATION FORM

Student's Full Name:			Level:	
Student's Cell Phone:			Alternative Phone:	
Student's E	mail Address:			
Parent's Na	ıme:			
Parent's Phone:		Email:		
Emergency Contact Name:			Phone:	
	inrichment Class En eck the Class(es) that			
	Тар	Mondays	3:30-4:30 p.m.	Sommer Wadman-Huntley
	Pilates	Tuesdays	7:15-8:15 a.m.	Roxanna Cohen
	Contemporary	Tuesdays	4:30-5:30 p.m.	Gaby Blaney
	Lyrical	Tuesdays	5:30-6:30 p.m.	Cassandra McAlister
	Ballet/Pointe	Thursdays	4:30-6:00 p.m.	Gaby Blaney
	Fusion	Fridays	4:30-5:30 p.m.	Sommer Wadman-Huntley
attendance N.U. dance understand outlined in t	at all enrolled classes department in the even	s and rehearsals ent of an unexpe ces may result in ract.	is required in order to ected illness or emerg my removal from the	performance participation. My consistent of perform in the show. I will contact the ency requiring my absence. I piece. I will abide by all the rules Date:
Parent Signature:				Date:
For Office U	Jse Only: Donation Re	ceived:	Cash or Check #	: Date: