

PATTI HERM SCHOOL OF DANCE REGISTRATION

2009 – 10

719 E. Allegan St.

Otsego, MI 49078

NAME OF STUDENT _____ AGE _____

DATE OF BIRTH _____

MAILING ADDRESS _____
Street City Zip

EMAIL ADDRESS _____

HOME PHONE _____ CELL _____

SCHOOL ATTENDING (Fall 2009) _____

GRADE _____

MOTHER'S NAME _____ DATE OF BIRTH _____

Soc. Sec. # _____ Place of Employment _____

FATHER'S NAME _____ DATE OF BIRTH _____

Soc. Sec. # _____ Place of Employment _____

WITH WHOM DOES THE CHILD RESIDE? _____

IN CASE OF AN EMERGENCY PLEASE CONTACT:

NAME _____ PHONE NUMBER _____

PLEASE LIST ANY HEALTH PROBLEMS (such as allergies or physical disabilities) THAT WE SHOULD BE AWARE

OF _____ MEDICATIONS _____

PARENTS SHOULD CERTIFY BY SIGNATURE THAT THAT THEY WILL BE RESPONSIBLE FOR ALL PAYMENTS FOR THE 2009 – 10 SCHOOL YEAR AND WILL INFORM THE SCHOOL A MINIMUM OF TWO WEEKS IN ADVANCE IF THEIR CHILD OR CHILDREN ARE NOT CONTINUING WITH CLASSES.

PARENT
SIGNATURE _____

HOW DID YOU HEAR ABOUT US? (CIRCLE ONE)

Newspaper Ad

Website

Phone book

Other_____

Please list previous training or experience if you are new to Patti Herm School of Dance:

Please list previous classes attended at Patti Herm School of Dance

Please list classes, days and times which you are enrolling for 2009-10

Additional comments:

*Instructors will place students in appropriate levels based on age and skill level. Patti Herm School of Dance reserves the right to adjust students accordingly. Enrollment is on a first come first serve basis.

Please check our website for news and information www.pattiherm.com