

The Dance Center Of Spokane
 1407 E. 57th Avenue

Registration Form

Registration Date: Jun 10, 2013

Account No.

Spokane, WA 99223
 (509) 448-2464

Billing Name	<input type="text"/>		<input type="text"/>	
Address	<input type="text"/>			
City	<input type="text"/>	State	<input type="text"/>	Zip/Postal <input type="text"/>
Hm Phone	<input type="text"/>	SSN	<input type="text"/>	Private <input type="text"/>
E-Mail	<input type="text"/>			
Parent 1	<input type="text"/>		Hm. Phone	<input type="text"/>
Employer	<input type="text"/>		Wk. Phone	<input type="text"/>
	Cell	<input type="text"/>	Pager	<input type="text"/>
Parent 2	<input type="text"/>		Hm. Phone	<input type="text"/>
Employer	<input type="text"/>		Wk. Phone	<input type="text"/>
	Cell	<input type="text"/>	Pager	<input type="text"/>
Emergency Contacts	<input type="text"/>		Phone	<input type="text"/>
	<input type="text"/>		Phone	<input type="text"/>
	<input type="text"/>		Phone	<input type="text"/>
	<input type="text"/>		Phone	<input type="text"/>

Student Name	<input type="text"/>		<input type="text"/>	
Address	<input type="text"/>			
City	<input type="text"/>	State	<input type="text"/>	Zip/Postal <input type="text"/>
E-Mail	<input type="text"/>			SSN <input type="text"/>
Birthdate	<input type="text"/>	Sex	<input type="text"/>	School <input type="text"/>
				Grade <input type="text"/>
Medical Info:	<input type="text"/>			
	<input type="text"/>			
Dr. Name	<input type="text"/>		Phone	<input type="text"/>

Classes	Name	Level	Room	Day	Time	Tuition
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Registration Fee:

Total Tuition:

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LIABILITY/INDEMNITY AGREEMENT

I/We agree to hold harmless The Dance Center of Spokane, its Employees and its Lessor from any and all liability claims, actions, judgments, damages and injuries of any kind and nature whatsoever to the participant and/or his/her property arising from participation in activities for which the participant is registered.

I/We have familiarized myself/ourselves with the description of the activities, understand the hazards, the

Parent Signature: _____ Date: _____