DEANE SCHOOL OF DANCE REGISTRATION FORM 2025-2026

Student's name _____Age _____DOB _____

Address _____ Town_____ Grade in school_____

Parents' names _____

Home phone _____Cell phone(s) _____

Email addresses _____

How many years have you studied dance? (new students only) _____

CLASSES: Type of Class Day Time

Pre-K

(1)

(2)

(3)

(4)

(5)

TUITION PAYMENT PLAN: One payment for Sept. to June_____ "2-payments" plan_____

Tuition per season / per term	Registration fee ($30)	Total paid	Check number	Date paid
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

For office use only

COSTUME PAYMENT:

Costume amount paid_____ Date paid_____ Check number _____

Student measurements: Chest_____ Girth _____ Waist_____ Hips_____ Size_____

NUTCRACKER: *Is student participating in Nutcracker 2024? YES NO*

Nutcracker Tickets: # of tix purchased _____ Amount paid _____ Date Purchased_____

RECITAL TICKETS: # of tickets purchased_____ Amount paid_____ Date purchased_____