

DENISE WALL'S DANCE ENERGY
4020 BONNEY RD.SUITE 116 VA. BEACH, 23452
PHONE: 431-9645

Ballet/Pointe, Jazz, Lyrical/Contemporary, Hip-Hop, Tap, Flamenco, and Floor
Gymnastics

CIRCLE ONE: SUMMER / FALL

NEW STUDENT REGISTRATION FORM

NOTE * SECTIONS ARE REQUIRED FIELDS

AND MUST BE FILLED OUT TO COMPLETE REGISTRATION!

*STUDENT'S NAME: _____ DATE: - -

*DATE OF BIRTH: ____ - ____ - ____ AGE: _____

*ADDRESS: _____

*CITY: _____ *ZIP: _____

HOME PHONE: _____ *CELL: _____

***STUDENT OVER 18/PARENT/GUARDIAN NAME & SOCIAL SECURITY #:**

1: Name _____ SSN: _____

2. Name _____ SSN: _____

MOTHER'S WORK PHONE: _____

FATHER'S WORK PHONE: _____

***E-MAIL ADDRESS (PLEASE print clearly!):**

1. _____

2. _____

IN CASE OF EMERGENCY:

*NAME: _____ PHONE: _____

Student information:

- Please list and describe any medical condition that may impinge on the students ability to learn the material presented in class.

(This information will assist our teachers in helping the student understand the content)

Please note: The studio files are confidential, and only the teachers/office staff have access to them!

DANCE EXPERIENCE: (NEW STUDENTS MUST FILL OUT THIS SECTION)

- LIST STUDENT'S DANCE TRAINING. "PLEASE" INCLUDE THE NAMES OF THE SCHOOLS, SUBJECTS TAKEN, AND THE NUMBER OF YEARS STUDIED...

***Student Schedule/Tentative schedule:**

MONDAY: TIME	SUBJECT	TEACHER	STUDIO	TUESDAY TIME	SUBJECT	TEACHER	STUDIO
WED: TIME	SUBJECT	TEACHER	STUDIO	THURS: TIME	SUBJECT	TEACHER	STUDIO
FRIDAY: TIME	SUBJECT	TEACHER	STUDIO	SAT: TIME	SUBJECT	TEACHER	STUDIO

OFFICE USE ONLY!

***Registration date:** _____

***Registering for** _____ **hours per week**

NOTE: if the above schedule should need to be changed, it is up to the parent/student over 18 to make the change with the office staff before the schedule change!!

***Parent/Student initials:** _____