

2021-2022 ENROLLMENT APPLICATION

Student's Name:			
Date of Birth:	Class Age (as of Aug. 31st, 2021):	# Yrs a	t ADAAP
Parents Name (s):			
Street Address:			
City, State, Zip:			
		Evening Phone:	
*Email Address:		How Did You He	
Emergency Contacts:			7.3040 00
Previous Dance Experience:			
Years of dance completed to			
Special Notes/ Requests/ All			
_			
Please check all that apply and in	dicate the DAY & TIME of each class requal	esting on the line pro	vided.
CLASS (es) SIGNING UP FOR	See Class Schedule,	Class Information & I	Price List for fees on our website.
#1- CLASS (Combo, Ballet, Pointe, Tap	p, Jazz/Musical Theatre, Contemporary/ Lyrical, Acrobatic	c Arts, etc.)DAY	Time (start &end time)
· · · · · · · · · · · · · · · · · · ·	p, Jazz/Musical Theatre, Contemporary/ Lyrical, Acrobatio	, ,	
	p, Jazz/Musical Theatre, Contemporary/ Lyrical, Acrobatic		
· · · · · · · · · · · · · · · · · · ·	p, Jazz/Musical Theatre, Contemporary/ Lyrical, Acrobatic	, ,	
	p, Jazz/Musical Theatre, Contemporary/ Lyrical, Acrobatic p, Jazz/Musical Theatre, Contemporary/ Lyrical, Acrobatic		
#0- CLASS (Combo, Banet, Fomte, Tap	5, Jazz/Musicai Theatre, Contemporary/ Lyricai, Acrobatic	c Arts, etc.)DA1	1 mie (start &end time)
	e enrolled in regular class discipline of Solo th		note: separate pricing applies
	dy Discipline (ex. Ballet Tech or Discipline (ex. Balle		
	dy Discipline (ex. Ballet Tech or		
	dy Discipline (ex. Ballet Tech or		
Ensemble WeeklyBi-Week	1	U 1 3/-	
	Enrollment fee is NON-REFUNDABLE and the		
	will continue to be responsible for any tuition ar		
	ecital/concert fee of \$95.00 is due in addition to any photos or other likeness of my child in their pr		
	al activity-there are certain risks. I will not hold A		
	ry of any kind or Covid-19. <u>I understand that dan</u>		
	5 minutes of the end of class time. And, that dance		
	PICK UP MY DANCER, or additional fees may		
	ent Application is my commitment to registering		
) until written notification is given otherwise. I u		
	cademyofdanceartsandperformance and info		
necessary for my dancer.			
Signature (required):		Dat	te:
	ation along with your child's \$9	5.00 Administra	tion/Enrollment fee. ***
Office use: AMT\$			
Date received:	i ayment method: dash on	COR VGIIIIU	uy. ai
			

www.academyofdanceartsandperformance.com
204 East Main Street Elkin, NC 28621

(336) 526-1847 or (336) 835-8515

MAIL TO: 543 West Main Street, Elkin, NC 28621