

REGISTRATION FORM

Student's Name:.....

.....Age:.....

Parent's Name:.....

Address:.....

City:.....Zip:.....

Phone:.....

Emergency Phone:.....

E-mail:.....

Student's birthday :.....

Student's Dance Experience:

.....

Where did you hear about us?

.....

Enrolling for the following Summer Camp Program:

Storybook Camp (Age 3 - 4):

Number of days per week: 2 4

Week: ***1 June 11 - 14***

2 June 18 - 21

OVER PLEASE

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OVER PLEASE

Pre-Dance Camp (Age 5 - 6)

Number of days per week: 2 4

Week: 1 *June 11 - 14*

2 *June 18 - 21*

Ballet & Dance Camp (Age 7 - 8)

Number of days per week: 2 4

Week: 1 *June 11 - 14*

2 *June 18 - 21*

Total Tuition Attached:

\$ _____

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Number of days per week: 2 4

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Ballet & Dance Camp (Age 7 - 8)

Number of days per week: 2 4

Week: 1 *June 11 - 14*

2 *June 18 - 21*

Total Tuition Attached:

\$ _____

Please mail this card with your check to:
Irina Makkai Classical Ballet & Dance School
2126 First Street, Highland Park, Il. 60035
Phone: 433-1449; Irina@balletmakkai.com

NO REFUNDS

Please mail this card with your check to:
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