

Mark an "X" in the box next to the class(es) you are registering for.  
Please return form and payment to Balance Dance Company on or  
before your first class. 854 Fulton St. Boise, ID 83702

- |   |   |
|---|---|
| <input type="checkbox"/> <b>Early Modern</b><br>(4-6 yrs.)<br>4:15-5:00 Monday                                    | <input type="checkbox"/> <b>Modern 2</b><br>5:00-6:15 Wednesday                             |
| <input type="checkbox"/> <b>Modern 1</b><br>(7-10 yrs.)<br>5:00-6:00 Monday                                       | <input type="checkbox"/> <b>Modern 3</b><br>(2x week class)<br>4:45-6:00 Tuesday & Thursday |
| <input type="checkbox"/> <b>Professional Modern</b><br>(2x week class)<br>6:00-7:30 Monday<br>6:15-7:45 Wednesday | <input type="checkbox"/> <b>Modern 4</b><br>(2x week class)<br>6:00-7:30 Tuesday & Thursday |
| <input type="checkbox"/> <b>Teen/Adult<br/>Beg Modern</b><br>6:30-7:30 Tuesday                                    | <input type="checkbox"/> <b>Balance 2 Co. Class</b><br>6:00-7:30 Friday                     |
| <input type="checkbox"/> <b>Modern 1.5</b><br>4:00-5:00 Wednesday   | <input type="checkbox"/> <b>Balance Co. Class</b><br>4:00-6:00 Friday                       |

## YOUR PERSONAL INFO

Student Name \_\_\_\_\_

Parent Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, Zip code \_\_\_\_\_

Parent or Home Phone \_\_\_\_\_ Studnet Cell \_\_\_\_\_

Email \_\_\_\_\_

Signature \_\_\_\_\_  
(of parent if under 18)

I understand by signing that Balance Dance Company does not assume responsibility for injuries that may occur during dance class. Please inform instructor if dancer has illness or disability that may not allow him or her to participate fully.

In case of emergency, contact \_\_\_\_\_

phone \_\_\_\_\_