



Dancer's Name: _____

Date of Birth: _____ Age: _____

Food Allergies/Medical Conditions: _____

Parent/Guardian Name(s): _____

Address: _____

Phone: _____ (home) _____ (cell) _____ (work)

e-mail: _____

Circle the session you wish to enroll in:

Session 1, ages 4 – 7

(July 10 – July 14)

Session 2, ages 4 – 7

(July 31 – August 4)

Tuition: \$125 per session plus \$10 non-refundable registration fee

Family Discount: \$225 for 2 registered siblings, \$350 for 3 registered siblings

Multiple Session Discount: \$225 for both sessions

Register by Friday, June 16, 2017 to be guaranteed a spot. All payments must be made by the first day of your session. Submit registration form in Payment Box of the Valley School of Dance, or mail to Valley School of Dance, PO Box 515, Geneseo, NY 14454, with payment enclosed.

Total Amount Enclosed: _____ *Full Payment: \$125 tuition plus a \$10 registration fee*

Make checks payable to: Valley School of Dance, PO Box 515, Geneseo, NY 14454