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|----------------------------|-------------|
| <i>For office use only</i> | Waiver |
| Date | Policies |
| \$ | BlueBook |
| Ck# | QBooks |
| Cash | CompRoll |
| Credit | StudioRoll |
| For | Addressbook |
| | Teacher |

Registration Form 2024-2025

Student

Last name _____ First name _____

Dance class level _____ Day/time _____

Age (as of Sept 1st) _____ Date of Birth _____

School _____ Grade (fall '24) _____

Contact telephone _____

Email _____

Home Address _____

City _____ State _____ Zip _____

Mother's name _____

Employer _____ Work/cell phone _____

Father's name _____

Employer _____ Work/cell phone _____

Emergency contact _____ Phone _____

How did you hear about us? (please circle)

Returning student word of mouth referred by _____

Newspaper ad Internet search Facebook radio

yumamom.com website other _____

By my signature below, I acknowledge that I received the Academy Enrollment and Tuition Policies and agree to the terms as outlined:

Parent/guardian signature _____ **Date** _____