

Turning Pointe Dance Studio Studio

Address: 22705-8th Avenue, Hillcrest, AB

Mailing Address: 22 Northlander Road West, Lethbridge, AB T1J5G6

Studio: 403-562-7730 Email: tpdscnp5@gmail.com

Website: www.turningpointedance.ca Facebook: Turning Pointe Dance Studio Crowsnest

PRIVATE REGISTRATION FORM 2017-2018

| Student Name: | | Phone Number: | | | | |
|-------------------------------|-----------------------------------|------------------------------|-------------------------------------|--|------------|------------|
| Birthdate (month/day/year): _ | (Age of Birth as of Dec 31, 2017) | | | | | |
| Years of Dance: Ballet: | _Тар: | .Jazz: | _ Hip Hop: | Lyrical: | Pointe: | |
| TYPE: (circle one) SOLO / D | UO / TRIO | / SMALL- GRO | OUP (if duo | / trio / group list o | other danc | er's names |
| DISCIPLINE: (circle one) | Ballet Tap | | • | Musical T Contemporary | heatre | Pointe |
| MUSIC: Name of Song: | | | Artist: _ | | | |
| PRIVATE BOOKING: Day: _ | | Time: | | Week: | | |
| COSTUMES: Catalogue: | | | | | | |
| Page: | ID name or | ·#: | | | | |
| Size: | Color | : | | Headpiece: | | |
| Accessories & Extras | :: | | | | | |
| PROPS & SETS: | | | | | | |
| The r | remainder of | the balance will Solo: \$ | ll be paid by 6345.00 6230.00 | per private slot September 15 th , | 2017 | |
| Deposit Paid: | | | | | | _ |
| Parent Signature: | | | | Date: | | |