

South Loop School Hip-Hop Dance Class

Registration Form

Spring 2013

Parent's Name: _____

Child's Name: _____

Home Phone: _____

Cell Phone: _____

Address: _____

Email Address: _____

Emergency Contact: _____

(other than parent)

Emergency Phone: _____

Please indicate if your child attends South Loop After school Program:

Please circle: YES or NO

Child's DOB: ____/____/____ Age/Grade Fall _____ Teacher _____

***Complete payment must accompany registration form**

***Make Payment by check payable to: Linda Butler**

***Please sign/return the attached Agreement when turning in registration form.**