

Total Amount Paid	
Check# or Cash	Date Paid

## Audition Registration Form—2021

Student 1		Student 2
Name:		Name:
Birth date:	Age: Grade:	Birth date: Age:Grade:
Medical Issues: Type of Previous ex	xperience	
	io/# yrs. attended/_	
	check all you are interested in)	Interests (Please check all you are interested in)
Jazz		Jazz
Clog		Clog
Lyrical		Lyrical
Super Clog		Super Clog
Novelty		Novelty
Нір Нор		Нір Нор
Contemporary		Contemporary
Ballet		Balle†
Point/Pre-Pointe		Pointe/Pre-Pointe
Acro		Acro
Solo/duet/trio		Solo/Duet/Trio
Pre-Auditions \$20	(grade 3 or new to studio)	Pre-Auditions \$20(grade 3 or new to studio)
Auditions \$65		Auditions \$65
Teacher Placement	s \$85	Teacher Placements \$85
Student One Total	Tuition \$	Student Two Total Tuition \$
Morning _ \$ (Student		vo Total Tuition) = \$ Total Family Tuition Enclosed
		* Check if contact info has changed.
Primary Address, C	City, State, Zip	
Secondary Address	s, City, State, Zip	
Mom Phone #: Hor	ne: () Cell: (	_) Work: ()
Dad Phone #: Hom	ne: () Cell: (	) Work: ()
E-Mail Address		Student Cell: ()
Send registration f	form and check to: Jan Tripp 11775 L	Lehigh Avenue, Hastings, MN 55033.
Fore more informa	tion check the website <u>www.janssch</u> o	polofdance.com or call 651-438-3690 or 651-437-1584