

REGISTRATION FORM – SPRING 2018

| STUDENT'S NAME: | GENDER: | |
|---|--|---|
| STUDENT'S AGE: | BIRTHDAY: | |
| PARENT/GUARDIAN NAME: | PHONE: | |
| PARENT/GUARDIAN NAME: | PHONE: | |
| ADDRESS: | CITY: | STATE: |
| E-MAIL: | | |
| Please list any physical, mental, or h | nealth concerns regarding your cl | hild. |
| If registering for a French class, plea | ase list any exposure your child l | nas had with the French language. |
| CLASS LEVEL YOU ARE RESER | VING (Check One): | |
| □ French Toddler Ballet 2-3.5 year olds 9am | ☐ PreBallet 5-6 year olds 10am | □English Preschooler Balle 3.5-5 year olds 11am |
| NON-REFUNDABLE RESERVAT | TION FEE | \$25.00° |
| ☐ Cash ☐ Check to: Ella Thornton Mail checks to: 1420 NW 17 th Ave, Ste 88 Portland, OR 97209 | ☐ Facebook Messenger Frier☐ Google Wallet to: frenchb☐ Venmo: @Ella-Thornton | nd-To-Friend to: @miss.ella.thorntonabyballet@gmail.com |
| | the full price of the session. Payme | ent for the session is due by the first day |
| HOW DID YOU HEAR ABOUT M | IISS ELLA'S CLASSES? | |
| PARENT/GUARDIAN SIGNATURE: | | DATE: |