

Michelle's Studio of Dance, Inc.
602 Oak Street East Bridgewater MA, 02333
(508) 690-1350

Registration form

Reg. Date _____

Payment _____

Student Information

Last Name _____ First Name _____

Address _____

City _____ MA Zip _____

Grade(As of September) _____ Birthday _____

Parent/Guardian Information

Last Name _____ First Name _____

Address _____

City _____ MA Zip _____

Home Phone _____ Cell Phone _____

Email _____

Pre-School Use Only:

Attends Pre-School Mon____ Tue____ Wed____ Thur____ Fri____

Kindergarten Use Only:

Attends Kindergarten Mon____ Tue____ Wed____ Thur____ Fri____

Check off all the classes in which you wish to enroll:

Creative Movement Ballet Classical Ballet Hip Hop

Pre-School Tap Modern Boys Hip Hop

Kinder Combo Jazz Dance Company

I have read the Studio policy and tuition information and will adhere to the policies/fees of MSOD. I hereby release all owners, staff, instructors and all other liable parties and will not hold them responsible for any and all personal injury or damages with result to or from my participation at MSOD.

Parent or Guardian's Signature: _____ Date: _____

Thank you for choosing Michelle's Studio. We are looking forward to an enjoyable year.