

ZIPPITY DOO DANCE!

3-2-1 Fun! LLC

Registration Form

Child's Name: _____

Parent's Name(s): _____

Mailing Address: _____

Home Phone: _____ Cell: _____

Email address: _____

Child's Birthdate: ____/____/____ Age: _____

Emergency Contact Name & Phone #: _____

Allergies or Physical Disabilities?: _____

*** I understand that there are no refunds or credits in the event that I do not complete the course.

*** I understand that **3-2-1 Fun!** prints photographs of students for advertising purposes in brochures, newsletters, newspapers, and the web. Students are not identified by name without your approval.

Signature: _____ Date: _____

OFFICE USE:

Date: _____ Check #: _____ Amount: _____

Date: _____ Check #: _____ Amount: _____

Date: _____ Check #: _____ Amount: _____