INNERLIGHT
DANCE CENTER

CREATING THE
DANCER WITHIN!

| STUDENT | PARENT/LEGAL GUARDIAN |
|---|---|
| First Name: _____ | First Name: _____ |
| Last Name: _____ | Last Name: _____ |
| Street: _____ | Street: _____ |
| City: _____ | City: _____ |
| State: _____ Zip:_____ | State: _____ Zip:_____ |
| Phone: (_____) _____-_____ | Home: (_____) _____-_____ |
| DOB: _____/_____/_____ Age:_____ | Cell/Work: (_____) _____-_____ |
| School/Grade: _____/_____ | Email: _____ |
| ☐ Female ☐ Male | Facebook User: ☐ Yes ☐ No |
| Facebook User: ☐ Yes ☐ No | |

☐ Returning Student OR ☐ New Student

**How did you hear about us?**

☐ Flyer ☐ Website ☐ Facebook ☐ Friend ☐ Other : _____

## CLASS REGISTRATION

| CLASS | DAY | TIME | INSTRUCTOR | HOURS |
|---|---|---|---|---|
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Signature: _____ Date: ____/____/_____