

**THE GWINNETT BALLET THEATRE**  
**2204 Fountain Square Snellville, Ga. 30078**  
**770-978-0188**

**REGISTRATION FORM**  
**2010 - 2011**

Date \_\_\_\_\_

**PLEASE PRINT CLEARLY**

Dancer's Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent/Guardian Names \_\_\_\_\_

Parent/Guardian Occupations \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Wk Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**\*Please Print Clearly; we use email to distribute school/class information**

In Case of Emergency Contact \_\_\_\_\_  
Name Relationship to Student

Emergency Phone Number(s) \_\_\_\_\_

Allergies and Health Concerns \_\_\_\_\_

Academic School Attending \_\_\_\_\_ Grade \_\_\_\_\_ Release Time \_\_\_\_\_

Returning Student  
New Student – please fill out below

Years of Ballet Training and Where \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

**I have read and agree to the Payment and School Policies of Gwinnett Ballet Theatre**  
**Gwinnett Ballet Theatre has permission to use my child's name and photographic likeness**  
**in all forms and Media for advertising, trade, and any other lawful purpose and perpetuity.**

**Signed** \_\_\_\_\_

**Date** \_\_\_\_\_

Ballet class Level: \_\_\_\_\_

Additional classes - Level / day / time

Day/Time: \_\_\_\_\_

Tap: \_\_\_\_\_

Jazz: \_\_\_\_\_

Hip Hop: \_\_\_\_\_

**FOR OFFICE USE ONLY**

**Registration Fee:** \$ \_\_\_\_\_

**Payment:** \$ \_\_\_\_\_

**Tuition:** \$ \_\_\_\_\_

**Type:** Check Cash Credit Card

**Re #:** \_\_\_\_\_

Entered  
Email