

Rohanna Dance Productions  
2010 Summer Intensive Registration  
August 2-6

Parent or Guardian's Name: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please list any medical information that the teachers may need to be aware of:

\_\_\_\_\_

We will always try to call the parent or guardian listed above in case of an emergency.  
Please list another emergency contact below incase that person cannot be reached.

Emergency Contact: \_\_\_\_\_

People other than parent or guardian authorized to pick up my child:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Tuition: \$450.00 per dancer

-----OFFICE USE ONLY-----

Païd with cash: \_\_\_\_\_

Païd with check: \_\_\_\_\_

Païd in full: \_\_\_\_\_

Partial payment still owes: \$ \_\_\_\_\_