

*Pre-Ballet and Ballet  
Dance Program by  
Mrs. Isora Delmas of Florida Dance*



**STUDENT REGISTRATION FORM**

Child's Name \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone# (\_\_\_\_\_) \_\_\_\_\_ Cell# (\_\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**QUARTERLY FEE: \$110.00**

*(due in advance on September 15<sup>th</sup>, December 15<sup>th</sup> and March 15<sup>th</sup>)*

**ANNUAL REGISTRATION FEE: \$20.00**

- Please make checks payable to: **Florida Dance.**
- There will be a \$25.00 charge for any returned checks.

**DISCLAIMER:**

I hereby register my child for BALLET LESSONS offered by FLORIDA DANCE and certify that my child is physically able to participate in this Extra-Curricular activity. I fully release Highpoint Academy, Inc., its Owner, Directors, Employees and/or volunteers and Florida Dance, its instructors, authorized agents, members, and/or authorized guests, from any and all claims of injuries, accidents, and/or losses I may receive or sustain while learning, practicing, or performing dance movements and techniques during this optional Extra-Curricular activity.

Name of Parent/Legal Guardian: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**UNIFORM REQUIRED:**

**Jr. PK, VPK and Kinder.**

Pink leotard  
Pink tights  
Pink skirt  
Pink ballet shoes

**1<sup>st</sup> thru 4<sup>th</sup> Grade:**

Black leotard  
Pink tights  
Black skirt  
Pink ballet shoes

