## CKDA Fall Registration: 2014-2015 419-668-4622 or 419-744-2851

www.CynthiaKniffinDanceAcademy.com

In order to organize Fall class schedules, we will need confirmation & Registration from all students who plan to study with us in the fall. Please fill out separate forms for each child. A registration fee of \$15. per child or \$20. per family must accompany this form.

Name:	Date: _		<b>Enclosed Payment:</b>
Last First			Check #
Address:	ity	Zip	Check Amount:
Father's name			Cash Amount:
Mother's name			
Home phone	Birthday		and Age (as of Sept 1)
Work phone	Grade - Fa	all 2014	& ` ` ` `
Mother's cell			
Father's cell_	_ 1		
Dancer's cell			
What classes are you registering for:			
Possible conflicts:  May we send you notices by email:  Your current email:	Do you open	it regularly	7?
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Last First			Check #
Address:			Check Amount:
Street Ci	ty	Zip	Cash Amount:
Mother's name			
Home phone	Birthday		_ and age (as of Sept 1)
Work phone	Grade - Fa	all 2014	
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iviotner's cell	Dance ext	erience:	
Mother's cell Father's cell	Dance exp	erience:	
Father's cell	_ Dance exp	erience:	
Father's cell	_ Dance exp	erience:	
Father's cell  Dancer's cell  What classes are you registering for: Possible conflicts:  May we send you notices by email:	_ Dance exp 	perience:	