



Fall 2011 Registration Form

Student's Name (Last, First)

Date of Birth

Age

Parent's Name (Last, First)

Street Address

City

State

Zip

Home Phone

Alternate Phone

How did you hear about us? _____

	Class Day/Time
1st Choice	
2nd Choice	
3rd Choice	

Please check one:

Madison location

Sun Prairie location

Please check one:

Current Student

Previous Student

New Student

For Current Students only:

My first choice is my current class

Parent Consent:

Storybook Ballet is not responsible for any injury occurring to students while on the premises. Please inform us of all medical conditions at the time of registration.

Select Payment:

\$210.00 Full payment enclosed

\$110.50 Partial payment enclosed
(\$110.50 Due by Sept. 19, 2011)

Parent or Guardian Signature

Date

Please submit registration form and payment to:

**Storybook Ballet
702 N. Midvale Boulevard, Suite B20
Madison, WI 53705**