				•	·
Subjects Desired		. *			
					•
	F	REGISTRATIO	N FORM	1	
					Computer #
Tuition \$			·	4	Family #
Last Name		First		Grade	Age
Last Name	Day Care or			TO! 1	1 10
Nickname				**	
Address	· · · · · · · · · · · · · · · · · · ·		_ City, State, Z	ip	
Telephone	Birt	hday		Catechism – da	у
				tim	.e
Brothers & ages (at home) Sisters & ages (at home)				Cell #	
Parents names = Mom					
Mother employed by			Phone #	#	
Father employed by			Phone 7	# 	
Other person to notify			`		
Relation: Grandparent, Auni	t, Neighbor, Friend	l, Other Relative			
Does your child have any a	allergies or othe	r medical condit	ions?		and the second
If yes, please describe				170000000000000000000000000000000000000	· · · · · · · · · · · · · · · · · · ·
Previous Training: Where		How Long	,	Courses	
HOW DID YOU LEARN A		•			
() Newspaper Ad	() Poster	() TV ()	Reputation (() Telephone B	r () Friena ook Ad
Recommended by					
· · · · · · · · · · · · · · · · · · ·			· #	-1 .1	
Which newspaper do you s	ubscribe?	L C Am Press	S W Da	ally oth	ner
Bust Waist	Hips	Girth		T-Shirt S	ize
Dress S Have Karen measure)	ize	Shoe size		you wish to orc	er?
Would you be into	erested in any of ou	r other classes?	Adult Jazz or Tap	Dad's	
Country & Western Dan	ce Modeli	ng Cheerle	eading [~] Cl	ogging Ir	ish
*******	*****			******	*****
AGREE THAT I AM THE RE	SPONSIBLE PAR	NOTIO TY FOR THE ENT		F THIS ENDOLL	TO STUDENT
ं द्					
ALSO UNDERSTAND THAT	I MUST NOTIF	Y KAREN (person	ally) IN AL	DVANCE, IF I WI	SH TO WITHDRAW

I ALSO UNDERSTAND THAT I MUST NOTIFY KAREN (personally) _____ IN ADVANCE, IF I WISH TO WITHDRAW FROM A CLASS, AND THAT I WILL BE RESPONSIBLE FOR FEES UNTIL A NEW MONTH BEGINS.

UPON SIGNING THIS NOTICE, I DO HEREBY RELEASE, DISCHARGE, AND AGREE TO SAVE FROM ANY LIABILITY KAREN M OGDEN AND/OR ANY INDIVIDUAL RESPONSIBLE FOR ARTICLES LOST OR ANY AND ALL ACCIDENTS OR MISHAPS WHATSOVER, WHETHER DUE TO NEGLIGENCE OF STUDENTS OR SAID PARTY.

Signature of Parent / Guardian Date