

Vedanta Dance Academy

Registration Form September 2021-July 2022

Student Name_____

Birth Date_____ School_____ Grade_____

Medical info/Health Concerns_____

Parent/Guardian Name_____

Mailing address_____

City_____ State_____ Zip Code_____

Home Phone Number (____)_____ Email_____

Cell Phone Number(____)_____ Work Phone Number(____)_____

Emergency contact Name_____

Relationship to Student_____ Phone Number(____)_____

Registration Fees- \$35 (.)

Parent/Guardian signature:_____ Date:_____