



1030 N Crooks Rd  
Suite N  
Clawson, MI 48017  
248-550-6056  
[valentinaballet@outlook.com](mailto:valentinaballet@outlook.com)  
[www.vballetschool.com](http://www.vballetschool.com)

### Registration Form

Student Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Email: \_\_\_\_\_

Special Needs/Allergies: \_\_\_\_\_

Parents/Guardians Name (if student is under 18):  
\_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Previous Dance Experience:

Ballet: \_\_\_\_yrs      Pointe: \_\_\_\_yrs      Jazz: \_\_\_\_yrs      Contemporary: \_\_\_\_yrs

Previous Dance Schools: \_\_\_\_\_

Are you interested in Company Team: Yes    No

Classes Interested in: \_\_\_\_\_  
\_\_\_\_\_