

DAVIS DANCE AND GYMNASTICS
REGISTRATION FORM

Today's Date _____

Childs Name: _____ Birthdate _____ Age _____

Childs Name: _____ Birthdate _____ Age _____

Childs Name: _____ Birthdate _____ Age _____

Registration fee per child _____ Date Pd _____

Mother's Name: _____

Father's Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone #'s _____

How did you find out about Davis Dance? _____

Is it okay to use photos we may take during the season in newspapers, on our website,
etc.? _____

I have read all information in the enrollment packet and understand what is expected of
me and my child.

Parent/Guardian Signature: X _____