



OFFICE USE ONLY

Date Received \_\_\_\_\_

**STUDENT INFORMATION FORM**

Please print and complete the student information form completely. In order to complete the registration process, we must receive all completed forms.

How did you hear about DSPAC?

\_\_\_ Friend \_\_\_ Web \_\_\_ Radio \_\_\_ Newspaper \_\_\_ TV \_\_\_ Other (explain) \_\_\_\_\_

**STUDENT INFORMATION**

Please complete a separate registration form for each student enrolling.

|                       |                       |                  |                                   |
|-----------------------|-----------------------|------------------|-----------------------------------|
| _____                 |                       | _____            |                                   |
| <b>First Name</b>     |                       | <b>Last Name</b> |                                   |
| _____                 |                       | _____            |                                   |
| <b>School</b>         | <b>Grade</b>          | <b>Age</b>       | <b>Date of Birth:</b> ___/___/___ |
| _____                 | _____                 | _____            | _____                             |
| <b>Student Home #</b> | <b>Student Cell #</b> |                  |                                   |
| _____                 | _____                 |                  |                                   |

**Gender:**  female  male **Level:**  beginner  intermediate  advanced

**Years of Experience:** \_\_\_\_\_

**Ethnicity:**  African-American/Black  Caucasian  Native American

Asian  Hispanic  Other: \_\_\_\_\_

|                |              |                 |
|----------------|--------------|-----------------|
| _____          |              | _____           |
| <b>Address</b> |              | <b>Apt #</b>    |
| _____          |              | _____           |
| <b>City</b>    | <b>State</b> | <b>Zip code</b> |
| _____          | _____        | _____           |



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**PARENT / GUARDIAN INFORMATION**

Date Received \_\_\_\_\_

#1 Primary Contact

\_\_\_\_\_  
Parent/Guardian Name Relationship

\_\_\_\_\_  
Address Apt # Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
City State Zip code

\_\_\_\_\_  
Home # Cell #

\_\_\_\_\_  
Email Address

#2 Parent/Guardian

\_\_\_\_\_  
Parent/Guardian Name Relationship

\_\_\_\_\_  
Address Apt # Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
City State Zip code

\_\_\_\_\_  
Home # Cell #

\_\_\_\_\_  
Email Address

**EMERGENCY CONTACT**

\_\_\_\_\_  
Parent/Guardian Name Relationship



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**2016 SUMMER SESSIONS** (please select registered session)

- Session I Ages 7-18 (Half-Day 2-Week Program) - July 11<sup>th</sup> – July 22<sup>nd</sup>**
- Session II Ages 7-18 (Full Day 2-Week Program) - July 11<sup>th</sup> – July 22<sup>nd</sup>**
- Session III Ages 7-18 (Half Day 5-Week Program) – July 25<sup>th</sup> – August 26<sup>th</sup>**
- Session IV Ages 7-18 (Full Day 5-Week Program) – July 25<sup>th</sup> – August 26<sup>th</sup>**
- Saturday Session Ages 7-12 Drum (1-Hour Program) – July 25<sup>th</sup> – August 26<sup>th</sup>**
- Saturday Session Ages 7-18 (3-Hour Program) – July 16<sup>th</sup> – August 27<sup>th</sup>**
- Little Dancer Ages 3-4 (2-Hour Program) – July 16<sup>th</sup> – August 27<sup>th</sup>**
- Little Dancer Ages 3-4 (1-Hour Program) – July 16<sup>th</sup> – August 27<sup>th</sup>**
- Little Dancer Ages 5-6 (2-Hour Program) – July 16<sup>th</sup> – August 27<sup>th</sup>**
- Little Dancer Ages 5-6 (1-Hour Program) – July 16<sup>th</sup> – August 27<sup>th</sup>**