

# Class Registration

## Winter-Spring, 2017



musikinesis  
music. dance. dalcroze.

First Name (Adult)	Email
Last Name	Phone 1
Address	Phone 2
Address (Line 2)	
City	
State	ZIP Code
Emergency Contact Name	Emerg. Contact Phone

MusiKinesis Children Ages 5-8	Session I Session II Session III	Child's Name	Age
MusiKinesis Children Ages 9-12	Session I Session II Session III	Child's Name	Age
MusiKinesis Adults and Teens	Session I Session II Session III	Name (if different from "Adult" above)	Age (if teen)
Teachers' Class (Music and/or Dance)	Session I Session II Session III	Will you allow photographs or video of yourself/your child to be used for educational and/or promotional publication?	Yes No Not sure
Dance Class	Session I Session II Session III		
Total Classes:	x \$100 =	Financial aid required?	Yes No
2 or more classes per session? Subtract 20%	Total:		

Your signature  
(or digital initials)