

Studio '86 Fall Registration Form 2025

152 Poley Branch Lane

Kinston, NC 28501

Studio86dancer@yahoo.com

Student's Name _____

Grade in Fall _____ Current Age: _____ Date of Birth: _____

Address: _____
_____, NC _____

Email Address: _____

(This is very important because we do the majority of our communication through email. If you are not receiving monthly newsletters please be sure to contact Erin!)

Check Desired Classes:

Jazz _____

Hip-Hop (ages 7 and up) _____

Tap _____

Acro/Tumbling (ages 2 and up) _____

Ballet/Lyrical _____

Pointe _____

(By recommendation only...must be 11 to be considered)

*Note: If you wish to take more than one of one class, for example, 2 Tap Classes, please place a 2 by that desired class. You can only double up on 1 class style.

Guardian's Name: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Emergency Contact Name/Number: _____

Please note any special information that would be helpful in working with the student such as medications, allergies, scheduling conflicts, etc.:

There is a \$45 Registration Fee that must accompany this form. I will email next year's individual schedules out in July.

In signing this form, I hereby release Studio 86 from any liability in case of injury or accidents that take place on the Studio Premises or in Classes.
