

2012 HELLENIC DANCE MINISTRY REGISTRATION

Please print the following information for each Dancer in your family:

DANCER NAME: _____
FIRST NAME MIDDLE INITIAL LAST NAME

DANCER DATE OF BIRTH: _____ / _____ / _____ DANCER AGE (as of Sept 14, 2012): _____
MM DD YYYY YEARS OF AGE

DANCER NAME: _____
FIRST NAME MIDDLE INITIAL LAST NAME

DANCER DATE OF BIRTH: _____ / _____ / _____ DANCER AGE (as of Sept 14, 2012): _____
MM DD YYYY YEARS OF AGE

DANCER NAME: _____
FIRST NAME MIDDLE INITIAL LAST NAME

DANCER DATE OF BIRTH: _____ / _____ / _____ DANCER AGE (as of Sept 14, 2012): _____
MM DD YYYY YEARS OF AGE

DANCER NAME: _____
FIRST NAME MIDDLE INITIAL LAST NAME

DANCER DATE OF BIRTH: _____ / _____ / _____ DANCER AGE (as of Sept 14, 2012): _____
MM DD YYYY YEARS OF AGE

Please print the following information:

PARENT NAME: _____
FIRST NAME MIDDLE INITIAL LAST NAME

PARENT NAME: _____
FIRST NAME MIDDLE INITIAL LAST NAME

PHONE NUMBER 1: _____ PHONE NUMBER 2: _____

EMAIL 1: _____

EMAIL 2: _____

Please check the appropriate box per dancer:

1st Child

- YOUTH A \$30
- YOUTH B \$30
- TEENS \$40

2nd Child

- YOUTH A \$20
- YOUTH B \$20
- TEENS \$30

3rd Child

- YOUTH A \$20
- YOUTH B \$20
- TEENS \$30

Adult

- ADULT \$50

Payment Record (For Director Use Only)

Paid in Full Amount: \$ _____

Date: _____