



8737 Ridge Rd.
North Royalton, OH 44133
440-877-0002

PLEASE ENCLOSE A CHECK TO RESERVE YOUR PLACE IN CLASS
Check for \$36.00 is enclosed _____

Student Name _____
Address _____

Phone _____

Birthday _____

Age and Grade in September _____

Additional Daytime or Cellphone Numbers _____

Parent Names _____

E-mail _____

How did you hear about Kim's School of Dance _____

CLASS TIMES

(if I have not talked to you about a specific class time, then the schedule is still being formed, I will do my best to accommodate your conflicts!)

Please list any conflicts during the week so I may schedule class times accordingly. _____

Earliest in the day my child can attend class _____

Pre-K Students: Can you attend a daytime class? _____

NEW STUDENTS

I know someone who would like to receive information on Kim's School of Dance _____

Child's Name _____

Parents Name _____

Phone Number _____