Registration Form

Dancer's Na	me:
Age:	Grade Entering (Fall 2015):
Parents Ema	il Address:
Please círcle	(below) which session(s) your daughter would like to attend
1 st -3 rd Grade	Dance Camp
4 th -7 th Grade	Dance Camp
Drill Team I	Prep Camp (8 th -10 th Grade)
Please list ar	ny of your daughter's favorite songs or music artists, as I
will consider	this when picking music for the dances:
Previous Dai	nce Experience (Include how many years, and styles of
dance traine	d in):
Please list ar	y specific skills or styles of dance your daughter would like
to focus on w	híle at camp:

*Remember to fill out this form, the medical release form, and mail along with your check made out to Katie Lindsey by June 1st to reserve your spot. You will receive a confirmation email when I get your forms and payment.

5900 Sierra Grande Drive

Austín, TX 78759

Feel free to email me at <u>katielindsey96@gmail.com</u> with any questions or concerns.