

2009-2010 Registration Form

(Mail in or drop off at Bremerton Dance Center office)

Please enclose \$25 registration fee and first semester/months payment to:  
Bremerton Dance Center, 515 Chester Avenue, Bremerton, WA 98337

Student's Name \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

Student's Birthday \_\_\_\_\_

Signature \_\_\_\_\_

Email Address \_\_\_\_\_

Classes/Day Desired \_\_\_\_\_

\_\_\_\_\_