



REGISTRATION FORM

Please fill out a form for each child and mail in with tuition. Please make check payable to Durango Dance.

Mail to: Durango Dance, 1120 Main Ave., Suite #1, Durango, CO 81301

Student Name: _____ New Student Returning Student

Mailing Address: _____ City: _____ State: _____ Zip: _____

School: _____ Grade: _____ Age: _____ Birthday: _____

Parent: _____ Home Phone: _____ Cell: _____

Email: _____

Parent: _____ Home Phone: _____ Cell: _____

Email: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

Class: _____ Day: _____ Time: _____

For more information, please call 970-749-9881 or email durangodance@gmail.com

Amount Enclosed: _____