

Adult Ballet Registration Form

Student Name _____

Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____ @ _____

Emergency Contact While In Class _____

Phone Number _____

Visit our Facebook page: [Suzanne Hawkins' Ballet Workshop](#) for any changes to schedule/weather cancellations, etc.

Please keep your contact information up to date with us in the unlikely event of a class cancellation

Thank you!

Date _____