

Student's General Information  
for  
South County Dance Company

Students Name	Age	Date of Birth
Father's Name	Mother's Name	
Address	City	State
Home Phone Number	Father's Cell Number	Mother's Cell Number

Email address \_\_\_\_\_

Number of years of competitive dancing \_\_\_\_\_

**Child's School Schedule for 2008/2009**

*Name of School* \_\_\_\_\_ *School District* \_\_\_\_\_

	<i>School Start Time</i>	<i>School End Time</i>
<i>Monday</i>	_____	_____
<i>Tuesday</i>	_____	_____
<i>Wednesday</i>	_____	_____
<i>Thursday</i>	_____	_____
<i>Friday</i>	_____	_____

Please list any other sport or activity that your child is involved through out the year \_\_\_\_\_.  
Please attach that schedule.