## THE MILLER-MARLEY SCHOOL OF DANCE AND VOICE STUDENT REGISTRATION FORM

10448 Mastin; Overland Park, KS 66212 (913) 492-0004 • Fax #: (913) 894-2575 www.millermarley.com

**BOTH PARENTS OR RESPONSIBLE PARTY** 

Name(s):

FALL	
<b>SUMMER</b>	

PHONE NUMBERS
Home Phone:

Other at Addison as				BA 1 NA/						
Street Address:						Mom's Work #:				
City:				State: D		Da	Dad's Work #:			
Zip:					Mom's Cell #:					
E-Mail Address:					Dad's Cell #:					
			STI	IDENT I	NFORMATI	ON				
Last Name: First Name:								e:		
						T				
Student's Cell #:					Sc	School Name (Fall)				
Sex:FemaleMale Date of Bi				Birth:	Age:	Grade (Fall)				
Previous Dance Training: How did						d you hear about us?				
							* * FOR OFFICE USE ONLY * *			
						Type of	Effective	ADB		
DAY	DAY TIME CLASS NAME					Change	Date	Updated		
i	1									

## PLEASE TURN CARD AND SIGN...THANK YOU

I HAVE RECEIVED MY REGISTRATION MATERIALS AND HAVE AGREED TO COMPLY WITH THE CONDITIONS THEREIN INCLUDING BUT NOT LIMITED TO THE PAYMENT OF LATE FEES AND COLLECTION OF CHARGES, AND RELEASE OF LIABILITY FOR ANY INJURY, CLAIM, DEMAND, CAUSE OF ACTION OR LOSS OF ANY KIND.

Parent Signature\_\_\_\_\_\_Date

## For Office Use Only

Date	Description	Check #	Charges	Receipts	Balance
_					