



Dance Studio - Rapid City, SD

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 Rapid City, SD 57701  
 605.716.2020

## Registration Form

Family Name \_\_\_\_\_ Student: \_\_\_\_\_ Primary Contact: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Student's Email \_\_\_\_\_ Student Birthday    /   /    Student Age as of Sep 1: \_\_\_\_\_ Student Phone# (     )     -     \_\_\_\_\_

Primary Contact \_\_\_\_\_ Phone# (     )     -     \_\_\_\_\_ Primary Email \_\_\_\_\_

Secondary Contact \_\_\_\_\_ Phone# (     )     -     \_\_\_\_\_ Second Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone # (     )     -     \_\_\_\_\_ Relation \_\_\_\_\_

Medical Information (updated as needed) \_\_\_\_\_

Class Description	Week Day Please Circle	Time
	M T W R S	__ : __ _m to __ : __ _m
	M T W R S	__ : __ _m to __ : __ _m
	M T W R S	__ : __ _m to __ : __ _m
	M T W R S	__ : __ _m to __ : __ _m
	M T W R S	__ : __ _m to __ : __ _m
	M T W R S	__ : __ _m to __ : __ _m
	M T W R S	__ : __ _m to __ : __ _m

\*Please note: a liability waiver with acknowledgement of policies and procedures is required to attend any registered classes\*