

**Peninsula Ballet Theatre Conservatory of Dance  
Registration 2011 – 2012 – New Student**

Today's Date \_\_\_\_\_

Name \_\_\_\_\_  
*First* *Last*

Address \_\_\_\_\_  
*Street* *City* *Zip*

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Home Phone \_\_\_\_\_

Academic School \_\_\_\_\_ Grade \_\_\_\_\_

Medical Conditions (allergies etc) \_\_\_\_\_

Health Insurance Carrier \_\_\_\_\_ Insurance ID Number \_\_\_\_\_

Mother/Guardian \_\_\_\_\_  
*First* *Last*

Mother/Guardian Home Address \_\_\_\_\_

Mother/Guardian Home Phone \_\_\_\_\_ Mother/Guardian Cell \_\_\_\_\_

Mother/Guardian Employer \_\_\_\_\_ Mother/Guardian Work Phone \_\_\_\_\_

Mother/Guardian Email \_\_\_\_\_

Father/Guardian \_\_\_\_\_  
*First* *Last*

Father/Guardian Home Address \_\_\_\_\_

Father/Guardian Home Phone \_\_\_\_\_ Father/Guardian Cell \_\_\_\_\_

Father/Guardian Employer \_\_\_\_\_ Father/Guardian Work Phone \_\_\_\_\_

Father/Guardian email \_\_\_\_\_

Emergency Contact (other than Mother or Father)

Name \_\_\_\_\_ relationship \_\_\_\_\_

Phone \_\_\_\_\_

Class (s) you wish to register for \_\_\_\_\_

How did you hear about PBT? \_\_\_\_\_

Are you currently taking dance classes? \_\_\_\_\_ Where? \_\_\_\_\_

What level classes are you taking – how many times a week? \_\_\_\_\_

Pre-Professional Division classes – all classes must be taken  
Beginning Ballet 2 – Tuesday and Thursday  
Elementary Ballet 1&2 – Tuesday and Thursday  
Intermediate Ballet – All six classes, Monday, Wednesday & Friday