



Family Registration Form

(Family Name)

New Student Registration

Updated Registration/Information

(Contact Name)

Home Phone #

Cell Phone #

Alternate #

Home Address

City

State

Zip

Emergency Contact Information - Name & Phone #

Billing Contact Information - Name & Phone #

Billing Contact Email Address (Vibe monthly statements will be sent to this address)

Dancer's Name

Male Female

Birthday

Dancer's Name

Male Female

Birthday

Dancer's Name

Male Female

Birthday

Dancer's Name

Male Female

Birthday

Signature

By signing this Family Registration Form, I acknowledge that I have read Vibe Performing Arts' Studio Policies and agree to the terms set forth, including payment options and studio policies regarding class attendance, withdrawals and transfers.