

# 2025-2026 STUDENT REGISTRATION FORM

Note: Separate registration form and health form required for **each student**

<b>STUDENT NAME :</b> _____
<b>Date of Birth:</b> _____ <b>Age</b> _____
<b>PARENT(S) NAME:</b> _____
<b>ADDRESS:</b> _____ _____
<b>PHONE:</b> _____ <b>*EMAIL</b> _____
<small>*ALL STUDIO NOTICES AND UPDATES ARE SENT VIA E-MAIL*</small>

**Class(es) Desired:    Teacher    Day    Time**

**Please list classes in the order of the days of the week (Mon-Sat).**

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**Please return the following items to:**

**LAD, 620 Paxton Place Suite 107, Lititz, PA 17543**

1. Student registration form
2. Medical/Refund Information sheet (print out @ [www.lititzacademyofdance.com](http://www.lititzacademyofdance.com))
3. **\*\*\$25.00 Non-refundable registration fee** per student. Payment must be enclosed to secure your space.
4. **Include First installment tuition payment** - Tuition reminder will be sent to the email address you listed above thru the online service Constant Contact. SECOND tuition installment is due Sept.1.