

# Montague School of Irish Dance Registration Form 2011-2012

To be completed by each family and returned with a non-refundable fee of \$20.

## **STUDENT NAME(S)**

Child 1:	DOB:
Child 2:	DOB:
Child 3:	DOB:
Child 4:	DOB:
Child 5:	DOB:

## **CONTACT INFORMATION**

Address:
City/State/Zip:
Home Phone:
Cell Phone:
E-mail:

## **CONTACT NAMES**

Mother:	
Father:	
Other:	Relationship:

This form and a \$20.00 check payable to *Montague Irish Dance* should be returned to:

**Montague Irish Dance  
c/o Katie McCarthy  
103 Columbia Ave  
Syracuse, NY 13207**

Please check to confirm:

- I give permission for the above information to be included on the Montague Irish Dance Roster.
- I give permission for my child's picture to appear on the Montague Irish Dance website.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_