



VHS DANCE CLINIC REGISTRATION

Pre-registration: Now-Thursday April 19 – \$30
(Please make checks payable to: Valencia High School)

DANCER INFORMATION

Name: _____ Age: _____

Address: _____

School you attend: _____

Grade: _____ T-shirt size: _____ Adult Child

PARENT OR GUARDIAN INFORMATION

Name: _____

Parent email: _____

EMERGENCY CONTACT INFORMATION

Name: _____

Relationship: _____

Phone: _____

CLASSES OFFERED:
Jazz, Lyrical Contemporary, Hip Hop

CHOOSE YOUR TRACK:

Track 1: All Hip Hop

Track 2: All styles - Jazz, Lyrical & Hip hop for
(Choose one)

beginner intermediate advanced

Lunch included

Mail to:
421 Collard Way, Placentia, CA 92870
by Thursday, April 19, 2017 for pre-registration

For Questions: vhsclinic@gmail.com