



# Mt. Zion School of Performing Arts Summer Registration Form

Parent Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone \_\_\_\_\_ Work/Cell Ph \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Medical Problems \_\_\_\_\_  
(specify student)

## Student 1

Name _____ (First) (Last)		Birth Date ____/____/____		Gender M F					
T-shirt Size: (circle one)	Child Small	Child Medium	Child Large	Child X-Large	Adult Small	Adult Medium	Adult Large	Adult X-Large	
Class Number and Description							Price		
1								\$	
2								\$	
3								\$	
4								\$	
5								\$	
6	Dance Summer Camp (ages 7 and up) ONLY Alternate Elective Optional: Silks \$30							\$	
							Total	\$	

## Student 2

Name _____ (First) (Last)		Birth Date ____/____/____		Gender M F					
T-shirt Size: (circle one)	Child Small	Child Medium	Child Large	Child X-Large	Adult Small	Adult Medium	Adult Large	Adult X-Large	
Class Number and Description							Price		
1								\$	
2								\$	
3								\$	
4								\$	
5								\$	
6	Dance Summer Camp (ages 7 and up) ONLY Alternate Elective Optional: Silks \$30							\$	
							Total	\$	

Student 1 Total \$ \_\_\_\_\_ + Student 2 Total \$ \_\_\_\_\_

Grand Total \$ \_\_\_\_\_

(Limited refund and cancellation policy. Visit our website for details.)

Cash       Check (Make check payable to Mt. Zion)

Credit Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVV2 \_\_\_\_\_