



# PERFECT POINTE

## PERFORMING ARTS STUDIO

### Blossoming Ballerinas 2018 Registration

Student's Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ Zipcode \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Type of Payment:      cash      check # \_\_\_\_\_

                         Visa              MC              Discover              AMEX              Debit

Credit card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Security Code \_\_\_\_\_

Signature \_\_\_\_\_

*Please send your registration form and payment to:*

*Perfect Pointe  
30 Gail Court  
Sparta, NJ 07871*

*Or email to: [jessica@perfectpointestudio.com](mailto:jessica@perfectpointestudio.com)*