

In Sync Dance of Auburn Registration Form 2020-2021

Student's First Name	lame Last Name				
Parent's Name (First & Last)	Student's Date of Birth				
Home Phone #	Other Phone #				
Address					
City	Zip Code				
Email (Mandatory)	I				
Student's School					
How did you hear of ISDA?					
Medical Conditions WE Should Be Aware Of?			<u> </u>	5	
Participating in performances (Please circle): (If allowed under current COVID-19 conditions)	Nutcracker		Showcase-Spring	Ballet-June	
(ii anowed under current COVID-19 conditions)	Y or N		Y or N	Y or N	
Classes-Full Title	Day	Day Time Class Instructor			

MEASUREMENTS-COMPLETED BY ISDA STAFF

Bust	Waist	Hips	Girth	Tights	Street Shoe
					Ballet Jazz Tap