

Yellow House Arts Academy, LLC

Family Name/Apellido de la familia: _____

Registration Form/Forma de registraci3n

Address/Direcci3n : _____

Name Student 1/Nombre del estudiante 1: _____ **Birth Date/Nacimiento:** _____

Known disabilities, allergies, medical conditions/Desabilidades, alergias, condiciones medicas: _____

Class(es): ☐ Dance _____ ☐ Music _____ ☐

Other _____

Name Student 2/Nombre del estudiante 2: _____ **Birth Date/Nacimiento:** _____

Known disabilities, allergies, medical conditions/Desabilidades, alergias, condiciones medicas: _____

Class(es): ☐ Dance _____ ☐ Music _____ ☐

Other _____

Name Student 3/Nombre del estudiante 3: _____ **Birth Date/Nacimiento:** _____

Known disabilities, allergies, medical conditions/Desabilidades, alergias, condiciones medicas: _____

Class(es): ☐ Dance _____ ☐ Music _____ ☐

Other _____

If any students listed above are under 18 years of age, please fill in parent/guardian info below. Si cualquiera de los estudiantes arriba tiene menos de 18 a1os de edad, llena la informaci3n del padre/guardiano abajo.

Parent/Guardian 1 Name/Padre/guardian 1: _____ Cel: _____

Email/Correo electr3nico: _____

Parent/Guardian 2 Name/Padre/guardian 2: _____ Cel: _____

Email/Correo electr3nico: _____

Emergency Contact 1/Contacto de emergencia 1: _____ Cel: _____

Emergency Contact 2/Contacto de emergencia 2: _____ Cel: _____

Alternative Pick-up Person/Otra persona para recoger: _____ Cel: _____

I, _____, certify the information listed above is true and correct to the best of my knowledge.

☐ I authorize the Yellow House Arts Academy LLC to take digital images of me/my student child(ren) during class sessions and performances to post on social media.

Yo, _____, certifico que la informaci3n es verdad y correcto que yo sepa.

☐ Autorizo la Yellow House Arts Academy, LLC tomar fotos digitales de de mi/mis ni1os estudiantes durante sesiones de clase o presentaciones para poner en la media social.

Signature/ Firma: _____ Date/Fecha: _____

For Office Use Only/Para el uso de la oficina:

Expected monthly tuition Student 1: \$ _____ Expected monthly tuition Student 2: \$ _____

Expected monthly tuition Student 3: \$ _____ Expected monthly tuition per family: \$ _____