

REGISTRATION FORM

For The tapdance centre

STUDENT NAME	
Parent's names (if applicable)	
<div style="text-align: right; margin-bottom: 5px;"><i>Home:</i></div> Phone Number(s) <div style="text-align: right; margin-top: 5px;"><i>Cell:</i></div>	
Email Address	
Level of tap exp. (circle) (include years of experience)	Beg / Int / Adv
Age	
EVENT or CLASS you are registering for (i.e. workshop / summer classes / fall classes)	
Mailing Address	

** ALL CHEQUES PAYABLE TO "THE TAPDANCE CENTRE"

**Mail Registration Form to: 50 Wesley Ave., Mississauga, ON, L5H 2M7

** To contact us: email: thetapdancecentre@live.com or visit: www.whats-on-tap.com

**Your registration will be confirmed upon receipt and you will be notified with the finalized location and times of the event or classes