

# ANITA N. MARTINEZ BALLET FOLKLORICO

## The ANMBF Dance Academy

### Registration Form

Registration Fee: \$25.00

Fall 20\_\_ Spring 20\_\_

Date: \_\_\_\_\_

#### Student Information *(please print)*

Last:	First:	Middle Initial:	
Home Phone:	Cell Phone:		
Street:		Apt:	
City:	State:	Zip:	Gender:
School Attending/Grade Level:		School District:	
Date of Birth:		Email:	
Please list any medical conditions:			

#### Parent/Guardian Information *(please print)*

Name:
Relationship to Student:
Parent Email:
Home Phone:
Work Phone:
Cell Phone:
Street Address:
City, State, Zip:

#### Liability Waiver

The ANMBF will not be held liable for lost or stolen articles or for injuries sustained while on or around the premises located at 4422 Live Oak, Dallas, TX, 75204 and Anita Martinez Recreation Center 3212 N. Winnteka Ave Dallas TX, 75212. I have read and agree to the statement above. (Note Parent must sign if student is a minor.) I hereby give ANMBF and its assignees rights to photograph, film, videotape, audio record, or any other manner of recording by any other means for purposes of promoting ANMBF and volunteerism.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

#### FOR OFFICE USE ONLY

#### Classes Registering For

Class Code(s):	REG Fee:	Tuition Due:
Processed By:		Date:

4422 LIVE OAK STREET, DALLAS TX 75204 | TEL: 214.828.0181 | FAX: 214.828.0101

[WWW.ANMBF.ORG](http://WWW.ANMBF.ORG)

#### Measurements

W: \_\_\_\_\_ L: \_\_\_\_\_ G: \_\_\_\_\_

#### Monthly Payments

#### Costume Status

Skirt: \_\_\_\_\_ Blouse: \_\_\_\_\_

Hair Bun Accessory: \_\_\_\_\_ Flower Piece: \_\_\_\_\_

_____	_____
_____	_____
_____	_____
_____	_____