

# **CDT Dance Party Registration Form:**

**Dancer's Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Parent's name:** \_\_\_\_\_

**Event celebrating:** \_\_\_\_\_

**Home Phone:** (\_\_\_\_) \_\_\_\_\_ **Cell Phone:** (\_\_\_\_) \_\_\_\_\_

**Party Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_ **Approximate No. of Guests:** \_\_\_\_\_

**1 ½ hour party** \_\_\_\_\_ **or 2-hour party (time for cake and/or opening presents)** \_\_\_\_\_

**I understand that the included \$50.00 deposit is non-refundable and the balance is due by the end of the party. (We accept cash or checks payable to CDT.)**

**Parent's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_