



Recital Form

Please complete the form below and return to Dimensions by **January 31, 2009.**

Dancer #1 Name: _____

Dancer #2 Name: _____

Dancer #3 Name: _____

Parent/Guardian Name: _____

Home phone: _____

Cell Phone: _____

Agreement:

I agree to honor all requirements set forth in the recital letter.

- 1. Attendance to class**
- 2. Attendance to dress rehearsal**
- 3. Payment of the recital and costume deposit fees**
- 4. Payment of all tuition and costume balances in full before the recital**

Dancer #1 Signature: _____

Date: _____

Dancer#2 Signature: _____

Date: _____

Dancer #3 Signature: _____

Date: _____

Parent/Legal Guardian's Signature: _____

Date: _____

Office Use Only Please

Date Paid _____

Ck # _____

Amt _____