



Boombbox Dance Studio

After School Care 2023-2024

Student Information

Full Name: _____ D.O.B: _____
Last First M.I.

Home Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Parent 1: _____ Email _____

Phone: _____ Emergency Contact: _____

Parent 2: _____

Phone: _____

Persons (Other than Parent 1 or 2) authorized to pick up your child.

School Information

School: _____ Grade: _____

_____ Dismissal Time

My child will attend:

Everyday _____

Mon: _____ Tues: _____ Wed: _____ Thurs: _____ Fri: _____

Rates

Registration Fee: \$50

Weekly Fee: \$70

Fees are due every Monday by 6:00pm

Pick up is at 6pm daily w/ 10-minute grace period.
\$1 per minute after 6:10

Signature: _____ Date: _____

