## WAITING LIST APPLICATION

STUDENT INFORMATION FOR: <u>DRAMA, VISUAL ARTS, &amp; VIOLIN</u> – Ages 6-19; <u>PI ANO</u> – Ages 7 & Up; <u>DANCE</u> – AGES 9-19	
AREA(S) OF INTEREST	
PLEASE PRINT	
FEMALE: MALE: DATE:	TIME:
NAME OF STUDENT:	AGE:
ADDRESS:	
CITY/STATE/ZIP:	
HOME TELEPHONE #:	WORK #:
CELL#:	PAGER#:
DATE OF BIRTH:	GRADE:
PARENT OR GUARDIAN INFOR	MATION:
PARENT NAME (GUARDIAN):	
ADDRESS: (Only if different from ab	pove)
CITY/STATE/ZIP:	
PARENT (GUARDIAN) WORK #:	
CELL PHONE #:	PAGER #:
PRIC	OR TRAINING (IF ANY)
AREA OF TRAINING:	
PLACE OF TRAINING:	
CONTACT PERSON:	
ADDRESS:	
CITY/STATE/ZIP:	
PHONE#:	
EMAII.:	