



Mt. Zion School of Performing Arts Summer Registration Form

Parent Name _____

Address _____

City _____ State _____ ZIP _____

Home Phone _____ Work/Cell Ph _____

E-Mail Address _____

Medical Problems _____
(specify student)

Student 1

Name _____ (First) (Last)		Birth Date ____/____/____	
		Gender M F	
T-shirt Size: (circle one)	Child Small	Child Medium	Child Large
	Child X-Large	Adult Small	Adult Medium
	Adult Large	Adult X-Large	
Class Number and Description			Price
1			\$
2			\$
3			\$
4			\$
5			\$
6	Dance Summer Camp ONLY Snack Shack Coupon Qty _____ x \$10 =		\$
Total			\$

Student 2

Name _____ (First) (Last)		Birth Date ____/____/____	
		Gender M F	
T-shirt Size: (circle one)	Child Small	Child Medium	Child Large
	Child X-Large	Adult Small	Adult Medium
	Adult Large	Adult X-Large	
Class Number and Description			Price
1			\$
2			\$
3			\$
4			\$
5			\$
6	Dance Summer Camp ONLY Snack Shack Coupon Qty _____ x \$10 =		\$
Total			\$

Student 1 Total \$ _____ + Student 2 Total \$ _____

Grand Total \$ _____

Cash Check (Make check payable to Mt. Zion)

Credit Card # _____

Exp. Date _____ CVV2 _____

FOR OFFICE USE ONLY

Amount Received \$ _____

Date ____/____/____