



REGISTRATION

Dancer Name:	Parent Name:
Dancer E-mail:	Parent E-mail:
Dancer Phone:	Parent Phone:
Date of Birth:	Address:
Age:	

Interests and availability (check all that apply)

COMPETITIVE TROUPES _____ SHOW TEAM _____ STOMP _____ REGGAETON _____
KRUMP _____ BREAKDANCE _____ HIP HOP _____ FREESTYLE _____

All Edge dancers are welcome to join us at dance conventions and workshops. Are you interested in joining us for any of these? _____

If selected mid season, are you interested in and available for our competitive or show troupes?

List prior dance and/or competition experience (none required):

How did you hear about The Edge?

There are absolutely no refunds on any fees collected by The Edge under any circumstances.

Dancer Signature: _____

Parent Signature: _____

Date: ____/____/____