



# SHEILA PARKINS ACADEMY OF DANCE & MUSIC

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[www.sheilaparkins.com](http://www.sheilaparkins.com)

## REGISTRATION FORM / FORMULAIRE D'INSCRIPTION

Registration date: \_\_\_\_\_

Registration Fee / Frais d'inscription: \_\_\_\_\_

Tuition Advance/Acompte: \$150.00 post-dated August 1st/ postdaté 1er aout

Name of Student Nom de l'Etudiant	Age	Birthdate / Date de Naissance (ex: May 24th, 1994 / 24 mai 1994)
1		
2		

### Address / Adresse

Street / Rue: \_\_\_\_\_

City / Ville: \_\_\_\_\_

Province: \_\_\_\_\_

Postal Code / Code Postale: \_\_\_\_\_

**\*New Student/Nouveau etudiant(e)\*: How did you hear about us? Comment avez-vous entendu parler de nous?**

### **Contact Information / Information de contact**

Mother / mere: \_\_\_\_\_

Father / pere: \_\_\_\_\_

Home / Res: \_\_\_\_\_

Home / Res: \_\_\_\_\_

Mother / mere Cell: \_\_\_\_\_

Father / pere Cell: \_\_\_\_\_

Work / Travail: \_\_\_\_\_

Work / Travail: \_\_\_\_\_

Email / Courriel: \_\_\_\_\_

Emergency # / # d'urgence: (    )

**Special Needs/Besoins Speciaux:** \_\_\_\_\_

List your class choices here/Listez vos choix de cours ici:

**Office usage only / A l'usure du bureau seulement**

**(DO NOT USE/NE PAS UTILISER)**

Reg Fee:                      Mode of payment:              CASH              CHQ #              VISA              MC

Tuition Advance:

Class Fees:

Reg Form \_\_\_\_ Reg Waiver \_\_\_\_ Covid Waiver \_\_\_\_ C/C Form \_\_\_\_