

**Please complete and return this form NO LATER THAN
Thursday, February 1st with a \$40.00 per costume deposit.
Please complete 1 form for EACH STUDENT**

Students Name _____ **WILL or WILL NOT** Participate. (circle one)

By signing this participation contract, you agree and commit to your child's participation in our 2018 recital as well as paying all costume fees for any/all costumes ordered for your child.

List each class in which your child **WILL PARTICIPATE** including (class day, time and teacher ex.mon 3:30 Lori B1)

1. _____ 2. _____ 3. _____
4. _____ 5. _____ 6. _____
7. _____ 8. _____ 9. _____

If there are 1 or more classes that your child will NOT participate in addition to the ones above that they WILL participate in:

Please note NON PARTICIPATING class/es here: 1. _____ 2. _____

Parent Signature _____ Date _____ Amount Paid \$ _____

for office use only:

Deposit \$: _____ Payment form: CASH CHECK MC VISA AMEX Entered Date: _____
SD LEDGER