

REGISTRATION FORM PAS DE DEUX

NAME _____

SURNAME _____

BIRTH DATE _____

NAME _____

SURNAME _____

BIRTH DATE _____

CATEGORY (BARS THE CATEGORY OF BELONGING):

BABY

JUNIOR

YOUNG

SENIOR

GENDER _____

CHOREOGRAPHER _____

TITLE OF CHOREOGRAPHY _____

TITLE MUSIC AND AUTHOR _____

SCHOOL OF _____

MEMBERSHIP _____

REFERENT (TEACHER) _____

TEL _____

E-MAIL _____