



Please Mail: Shannon Barry 161 Colonial St., West Hartford, CT 06110
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This fall registration form must be accompanied with your Tuition Payment. If you have more than one child, fill out an additional form. The registration form **must be received before August 15th** to secure a position in the class. Registration fee is \$25 per family per year. You can find extra forms on our web site. **All classes start the week of September 19, 2011**

per semester fees: **1 & 1/2 hr class \$290** **1 hr class \$200** **45 min class \$195**

Class location available: Canton, West Hartford, Plainville,
(Please circle where you will be taking class above)

New or **Returning** Student: Indicate yrs of dance with Shamrock _____

Day and Time of class: _____

Child's Name: _____ Birth date ___/___/___ Age _____

Address: _____ **E-Mail** _____

Town: _____ Zip Code _____

Phone: (Home) _____ (Cell) _____

Emergency person & number to contact: (please print) _____

Medical issues (asthma, seizures, diabetes, requiring medication) YES or NO If yes, Parent needs to be close by during class:

During the 1st semester only, after the 3rd week of class the tuition is nonrefundable. If you choose to not continue on or before the 3rd class, you will receive money back minus the classes taken. **Second Semester tuition is due December 31, 2011. After this date there is a \$10 late fee.** I agree to abide by all Shamrock School rules and those of the Irish Dance Teachers Association. (the policy is available at www.shamrockdancestudio.com)

Print parent name: _____ If new where did you hear about us _____

Parent Signature: _____