

Rince na h'Eireann Registration Form 2010/2011

1st Student Name: _____ **Date of Birth** _____

2nd Student Name: _____ **Date of Birth** _____

3rd Student Name: _____ **Date of Birth** _____

4th Student Name: _____ **Date of Birth** _____

Parents Names: _____

Address:

Home Phone: _____ **Cell Phone:** _____

Email address: _____

Class location/day/time _____

2nd class location/day/time _____

Unlimited Classes \$160 per month _____

Are you signing up for figures? **Yes** **No**

Saturdays – under 12@11am _____ **over 12 @ 12noon** _____

Each form must be accompanied by your registration fee and your tuition payment

Are you choosing monthly payments _____ **Semester Payments** ___ **Yearly Payment** _____

Mail to

**Rince na h'Eireann
450 Crompton Street
Charlotte NC 28273**