

Registration Form
High School Dance Symposium
November 5, 2005

Dance Educator: _____ Number of Students: _____

Address: _____ School: _____

City: _____ Address: _____

E-mail: _____ City: _____

Phone Home: _____ School Phone: _____

School Fax: _____

Teacher's Signature: _____ Date: _____

Teachers:

Only upon receipt of this form and your payment of \$90 will you receive information to enroll your students in specific classes. Schools will be given priority to register for classes by the order that registration fees are received. We will be sending out information to register for specific classes once payment is received. Please contact our office if you have any questions: (480) 965-1891.

Becky Dyer, Assistant Professor of Dance and Education Specialist
Pegge Vissicaro, Interim Chair, Department of Dance

Make checks payable to:

ASU Dance

Mail to:

Arizona State University
ASU Box Office, Herberger College
PO Box 872102
Tempe, AZ 85287-2102