

Galó Gitano

Registration Form

1. First Name _____ Last Name _____

2. If registering a child:

2a. Parent's Name _____ 2b. Child's Birthday _____ 2c. Child's Age _____

3. Home address _____

4. I am registering to participate in the _____ class on _____ at _____
(class name) (day of the week) (time)

5. Email address _____

6. Paypal email address if available _____

7. Phone numbers: Home (_____) _____ Cell (_____) _____

8. If you don't already receive our newsletter, would you like to receive it? Yes _____ No _____

9. How did you hear about our classes? _____

10. How much flamenco dancing experience do you have? _____

11. Payment options: Pay in 3 Installments Pay all at once and save 10%

Registration fee and class payments are not refundable.
Send your registration form and payment to:

Marianela Beloso
1036A Greenwood Ave.
Atlanta, Ga 30306

By signing, I am agreeing to the terms set forth above as well as those set forth in the General Flamenco Class Information document.

Signature _____ Date _____