

Darby Schools  
**Guest Registration Form For Dance**

Dance Date: \_\_\_\_\_

Name of Guest: \_\_\_\_\_ Age: \_\_\_\_\_

School he/she attends: \_\_\_\_\_ Grd: \_\_\_\_\_

If guest is under 18 please provide parents' name:

\_\_\_\_\_

\_\_\_\_\_

Guest Address:

Phone: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
(Sponsoring Student (Please Print)

\_\_\_\_\_  
Grade

\_\_\_\_\_ Approved

\_\_\_\_\_ Not Approved