

BCDC REGISTRATION FORM

2636 BRISTOL PIKE #4, BENSLEM, PA 19020
215-245-6646 www.bcdancecenters.com #BCDCstrong

Date: _____

Name: _____

Date of Birth: _____ Age: _____

Parent/Guardian _____

Mailing Address: _____

Phone/Cell: _____

Email Address: _____

Would you like BCDC to contact you with news and updates? Yes No

I would like to be enrolled in:



How did you hear about us? Facebook Friend/Word of mouth
 Sign Ad Publication Other _____

Is there a class not listed in which you are interested? _____

I have read and complied with the policies of BCDC

Parent's signature: _____

For office use only

Class day and time: _____

Fee(s): _____

Cash Check VISA MasterCard Discover AMEX