

Instructor: Charlene Oloa || Phone: (321) 278-8801 Email: [coloa@kpohana.com](mailto:coloa@kpohana.com)  
Instructor: Lucille Eballo || Phone: (407) 376-2219 Email: [lbeballo@hotmail.com](mailto:lbeballo@hotmail.com)

# REGISTRATION FORM

Student's Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Any Physical Limitations? \_\_\_\_\_

Father's Name (if Minor) \_\_\_\_\_ Mother's Name (if Minor) \_\_\_\_\_

**Class Locations**

*Sundays from 1pm – 2:30pm*  
Dancer's Edge Dance Studios  
7351 Aloma Avenue  
Winter Park, FL 32792

*Thursdays from 6:30pm – 7:30pm*  
Bellywood Studios  
2180 Central Florida Parkway Unit A4  
Orlando, FL 32837

**Tuition & Fees**

- \_\_\_ \$30 Yearly Registration Fee
- \_\_\_ \$35 Monthly Thursday Classes at Bellywood Studios (4 classes per month)
- \_\_\_ \$30 Monthly Sunday Classes at Dancer's Edge (3 classes per month)
- \_\_\_ \$50 Monthly Both Classes
- \_\_\_ \$12 per class walk-in rate

**Questionnaire**

- \_\_\_ I am interested in performing for public "halau" (school) performances on a voluntary basis for exposure only.
- \_\_\_ I am interested in performing professionally for paid performances.
- \_\_\_ Yes, I give permission to Kalena's Polynesian Ohana to use my likeness in any marketing/school publications should I be featured in any media including newsletters, flyers, presentations, video broadcasts, local newspapers, etc.

\_\_\_\_\_  
Signature (Parent's Signature if Minor) \_\_\_\_\_  
Date