

FESTIVAL BALLET PROVIDENCE SCHOOL

School Add/Drop Form

Please Print

Student Name: _____ Date: ___/___/___

School Year: _____ Quarter: _____ Phone: _____

List below all classes you are ADDING ONLY			
Class/Description	Day(s)	Time(s)	# of hours

List below all classes you are DROPPING ONLY			
Class/Description	Day(s)	Time(s)	# of hours

Please list your new class schedule by printing **all** your classes below.

NEW CLASS SCHEDULE			
Class/Description	Day(s)	Time(s)	# of hours

Total # of Core Ballet Class Hours/Week _____

Total # of Enrichment Class Hours/Week _____