



Lassen Family Services, Inc.

Dancing For A Brand New Me- Community Dancer Application

Name: _____

Contact Number: _____

Email: _____

Emergency Contact (Name and Number): _____

Please let us know the best way to contact you: Email___ Text___ Phone___

1. Briefly describe your interest in being a part of Lassen Family Services- Dancing For A Brand New Me event and what Lassen Family Services means to you:

2. Please let us know what dancing experience you have had in the past (no experience is needed!):
