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REGISTRATION FORM

NAME: FAMILY NAME:

ADDRESS: COUNTRY:

NATIONALITY: BIRTHDATE:

HIGHT: WEIGHT:

ACADEMICAL EDUCATION:

YEARS OF BALLET: POINTSWORK:

MODERN: CHARACTER:

WHAT ARE YOUR GOALS:

.....
(Participant's signature)

.....
(Legal Responsible)

**In Bavaria Ballet Academy
GmbH & Co. KG**
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