

2007 / 2008 FALL CLASS REGISTRATION FORM

Classes will begin the week of September 17th. Registration will be accepted by mail or by stopping by on Saturday, September 8th from 9am to 4pm & Monday, September 10th from 4pm to 9pm. Please fill out in full. Please use one section per person. Thank you.

Student's Name	Date of Birth	
Address	E-mail	
City	State	Zip
Parent/Guardian	Parent Workplace	
Home Phone	Work Phone	Cell Phone
Parent/Guardian	Parent Workplace	
Home Phone	Work Phone	Cell Phone
Emergency contact name & phone		
How did you hear about us?		

A \$25.00 non-refundable registration fee is required to hold your child's position.

CLASS	DAY	TIME	FEES
_____	_____	_____	Registration Fee \$ 25.00
_____	_____	_____	June Holding Fee (if monthly) x number of classes \$ _____
_____	_____	_____	1st Month of Classes \$ _____
_____	_____	_____	Recital Costume Fee \$ _____
_____	_____	_____	Total Deposit \$ _____
_____	_____	_____	Yearly Plan Payment \$ _____
_____	_____	_____	Total Tuition Amount Due \$ _____

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