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Account #:

2009-2010 Registration Form

Please write clearly and sign both the front & back.

(Siblings can be put on one form)

Dancer's Name: _____

Birthday: ____/____/____ Age: _____

(Returning students can skip this section unless contact info needs to be updated)

Billing Name: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____ Cell Phone #: _____

Work Phone #: _____ Email: _____

Name of Emergency Contact: _____

Phone #'s of Emergency Contact: _____

Please List Classes, Day and Time: _____

The tuition is divided into 3 payments and billed every 3 months. The registration fee is added to the 1st payment.

Tuition: \$ _____
Registration: \$ _____
 (\$20.00 first child and \$10.00 each additional)
Total: \$ _____

Recital costumes cost between \$65 and \$85 per costume. A \$65.00 (per costume) deposit is billed in November & the remaining costume balance is billed in March.

9/21/09	1 st payment:	\$ _____	Paid _____
11/15/09	Costume Deposit:	\$ _____	Paid _____
12/6/09	2nd payment:	\$ _____	Paid _____
3/14/10	3 rd payment:	\$ _____	Paid _____
3/14/10	Costume Balance:	\$ _____	Paid _____

ADA has a no refund policy. The fee for returned checks is \$35.00. Missed classes can be made up in appropriate age and level classes throughout the current dance season only.

Name: _____ Date: _____