



# School of Contemporary Dance 2009–2010 Registration Form

STUDENT NAME	DOB	AGE		
HOME ADDRESS	CITY	STATE	ZIP CODE	HOME PHONE
PARENT/GUARDIAN NAME	OCCUPATION	WORK PHONE	CELL PHONE	
PARENT/GUARDIAN NAME	OCCUPATION	WORK PHONE	CELL PHONE	
EMAIL ADDRESS FOR PARENT #1		EMAIL ADDRESS FOR PARENT #2		
EMERGENCY CONTACT	HOME PHONE	CELL PHONE		

Class Name	Day	Time

Registration Fee before July 15:	\$0
Registration Fee after July 15:	\$10.00
Registration Fee after August 22:	\$20.00
Option #1 Payment: Yearly	\$ _____
Option #2 Payment: Tri-monthly	\$ _____
Option #3 Payment: Monthly (Includes a \$5.00 monthly service fee. First and last month's tuition is due at the time of registration.):	\$ _____
Performance fee per class: \$10.00 x # _____ classes=	\$ _____
(2010 End-of-Year Showcase)	
<b>Total:</b>	<b>\$ _____</b>

If you wish to pay by credit card, please contact Emily Socolinsky at (410) 480-1686

Parent Signature	Date
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I understand that tuition is due on the 25th of the month when paying monthly and three months at a time. If payment is not made by the 8th of the following month, a \$10.00 late fee will accrue, and I will be billed. If payment is not made by the 15th of the month, I or my child will be withdrawn from class and a \$20.00 registration fee must be paid in order to re-register for the class. I understand that all registration fees and performance fees are non-refundable.