

# 2009 STUDENT REGISTRATION FORM

DATE		LAST NAME			
How did you hear about our studio?		Registration Check One ( ) New ( ) Returning			
Student First Name	Birthday (mm/dd/yyyy)	Age		Gender M F	
Student First Name	Birthday (mm/dd/yyyy)	Age		Gender M F	
Student First Name	Birthday (mm/dd/yyyy)	Age		Gender M F	
E-Mail Address					
E-Mail Address					
Home Phones					
Cell Phones					
Name of Father/Guardian			Occupation		
Name of Mother/Guardian			Occupation		
Street Address					
City/State/Zip					
Doctor – Hospital					
Medical Concerns					
Emergency Contact				Phone	

## CLASSES

MON		TUE		WED		THU		FRI		SAT		SUN	
TIME	CLASS	TIME	CLASS	TIME	CLASS	TIME	CLASS	TIME	CLASS	TIME	CLASS	TIME	CLASS

**Rules and conditions:** Tuition is due and payable on the first of each month (\$15.00 late fee will be added if paid after the 6<sup>th</sup> of the month). We do not send invoices. If your account is not current by the beginning of the next month, your student's place in class will be suspended until the account is paid in full or other arrangements are made with studio management. There is an annual registration fee of \$20 for each new student, \$10 for each returning student. Tuition is a flat rate based on an average of four weeks per month. When five weeks occur, the extra lessons balance out the "holiday months" when students receive fewer lessons. Tuition is non-refundable for any reason other than cancellation of classes. **Waiver:** I hereby release In Motion Studio of Dance of any responsibility for any injury incurred while attending classes. **Media Release:** I hereby give In Motion Studio of Dance permission to use film, videotape and/or photographs of the minor or adult on this application for lawful promotional or informational purposes without further authorization or compensation.

Parent (or Adult Student) Signature: \_\_\_\_\_

OFFICE USE ONLY	
1 <sup>ST</sup> TRIAL CLASS ON:	TOTAL CLASSES PER WEEK: _____
CLASSES TRIED:	TOTAL MONTHLY TUITION: _____
	PRO-RATED TUITION: _____
	REGISTRATION FEE: \$20.00 OR \$10.00
	MINUS ANY DISCOUNTS: _____
ENTERED INTO COMPUDANCE ON:	TOTAL AMOUNT DUE: _____
ENTERED INTO ATTENDANCE SHEETS ON:	CHECK # _____ DATE PAID: _____
ENTERED INTO QUICKBOOKS ON:	CREDIT CARD INFORMATION: VISA/ MC EXP. DATE: _____
ENTERED E-MAIL ADDRESS ON:	NUMBER: _____