

REGISTRATION FORM 2017 – 2018

1st Child (last) _____ (first) _____ (age) _____ School _____

2nd Child (last) _____ (first) _____ (age) _____ School _____

3rd Child (last) _____ (first) _____ (age) _____ School _____

Address: _____

City / State / Zip: _____

Email Address: _____

Parent's Names: _____

Phone Numbers: Home _____ Cell: _____

Emergency: _____ Work _____

Thank you for registering your child with our studio. Please list your child's name and preference of classes below.

Child	Class	Day	Time	Location	Tuition

A \$30 Registration fee and first month's tuition due at registration.

*******10% discount off year's tuition if paid in full by August 10th *******

Total Monthly Tuition: _____

Registration: _____

Total Balance: _____