Dussich Dance Studio-Registration Form (Please Print-Pencil Only)

											COMI	/IENTS	
DANCER NAME	AG		GRAI of Au			TE OF RTH		ME				ERSONALITY I To Know)	, ETC.
Classes of luterra	Pre-S	chool(Comb	o Ba	allet_	_ Tap_	Jaz	z Hi	p-Hop	Lyr	ical Co	ontemporar	y Acro
Classes of Interes	Mc	odernS	ocial	Cho	reog	raphy	Co	mpeti	tion	Adult	Classes	Private Le	essons
Dancer's T-Shirt Size: (<u>CS</u>	<u>CM</u>	<u>CL</u>	<u>CXL</u>	AS	<u>AM</u>	<u>AL</u>	<u>AXL</u>	(Circle	One)	
Parent or Guardian's Na	ame:												
Address:						City:						Zip:	
Home Phone:													
Email Address (optional													
EMERGENCY CONTACT													
Name (if different from	parent's info):												
Emergency Contact Pho	one #:						Relat	ionshi	p to St	tudent	:		
PERSON RESPONSIBLE	FOR ACCOUNT	(IF DIFFE	RENT	FRON	1 АВС	VE)							
Name:						Rel	ation	To Da	ncer:				
Address:						City: _						_Zip:	
Home Phone:		_ Mobile F	Phone	e:					Other I	Phone:			
	WAI	VER OF L	IABII	LITY &	R PHC	TO R	ELEA	SE AG	REEN	1ENTS			
name) permission to danc sustained on studio prope					_	-	_		_			-	
is in good physical condition	•				•				•		•	_	•
full rights to Dussich Danc			-		-		•			-			-
and video can be used in b			-			_			-		-		
with or without names in	press releases ai	nd other p	rint ac	dvertisi	ng. I u	nderst	and m	onthly	paym	ents are	due the	1st Week of e	ach month;
\$10 Late Fees will be asset													
I have read, understand a	_					y and	photo	releas	es. I un	derstar	nd I will b	e held respon	sible for all
tuition, costume payment	s, and late fees a	as listed. Ir	n this a	agreem	ent.								
Parent's Printed Name	Parent's Printed Name Date Date												
Total Registration Date Paid					rm of Payment Total Hours					Hours	Tot	al Monthly	
Amount \$40.00	23.0 . 4.0		(C	ash/Cr	edit/C	heck)			. 5 (4)			Fee	
740.00	Ç-10.00												
		1								<u> </u>		T	T
Class Name	Class Number	Day/Tim	ne l	nstruct	or		Clas	ss Nan	ne		Class umber	Day/Time	Instructor
		ļ				I							

Semester Payment

Semester	Semester Total Amount	Amount Paid	Date Paid	Form of Payment	Balance	Amount Paid	Date Paid	Form of Payment	Balance
Fall									
Spring									

Monthly Payment

Month	Amount Due	Late Fee	Amount Paid	Date Paid	Form of Payment	Balance	Amount Paid	Date Paid	Form of Payment	Balance
August										
September										
October										
November										
December										
January										
February										
March										
April										
May										
June										

Costumes

Class	Total Amount	Amount Paid	Date Paid	Form of Payment	Balance	Amount Paid	Date Paid	Form of Payment	Balance

Highli	ght whe	n paid	in full

PAID IN FULL

NOTES:		