

Stephanie's School of Dance

6831-L West Broadway

Pearland, TX 77581

281-485-6030

www.stephaniesdance.com

2019 – 2020 Registration Application

NAME _____

PARENT/GUARDIAN _____

AGE _____ BIRTHDATE _____ GRADE IN SCHOOL _____

ADDRESS _____

CITY _____ ZIP _____

HOME PHONE _____ MOM'S CELL _____

DAD'S CELL _____ BUSINESS PHONE _____

EMERGENCY CONTACT _____

EMERGENCY PHONE _____

EMAIL ADDRESS _____

I HAVE DANCED _____ YEARS.

STEPHANIE'S SCHOOL OF DANCE AND/OR ITS AGENTS ARE NOT RESPONSIBLE FOR ITEMS LEFT UNATTENDED. THE STUDIO AND/OR AGENTS ASSUME NO EXPENSE FOR INJURIES, OR RESULTANT EXPENSE, ARISING OUT OF EITHER THE FACILITIES OR PARTICIPATION IN THE ACTIVITIES. IN ADDITION, I HAVE RECEIVED AND READ A COPY OF THE RULES & REGULATIONS OF THE STUDIO.

___ I understand that tuition is due by the 8th of each month regardless of attendance and/or holidays. There is a \$10 late fee charged to ALL accounts after the 8th of the month.

___ I understand that tuition must be paid by automatic payments or by paying the full semester (August-December & January-May)

___ I understand that I must give a written notice by the 15th of the month to cancel classes for the following month, if not I am responsible for the following month's entire tuition.

___ I understand that I must have a current credit card(VISA or MASTERCARD) on file. I understand that my credit card will be charged on the 16th of the month, if my tuition is NOT paid by the 15th of each month. My credit card will be charged for tuition and any late fees.

CREDIT CARD # _____
CARD HOLDER'S NAME _____
EXPIRATION _____

PARENT SIGNATURE DATE

CLASS _____ DAY/TIME _____ INSTRUCTOR _____