

2017 FALL ENROLLMENT FORM

NAME: _____ **MALE** _____ **FEMALE** _____

ADDRESS: _____ **CITY:** _____ **ZIP:** _____

HOME PHONE: _____ **CELL PHONE:** _____

AGE: _____ **BIRTHDATE:** _____

EMAIL: _____

ALL CLASSES START MONDAY, SEPTEMBER 11, 2017. A \$15.00 NON – REFUNDABLE REGISTRATION FEE MUST ACCOMPANY THIS FORM OR REGISTRATION WILL NOT BE PROCESSED. SEPTEMBER TUITION MUST BE ENCLOSED WITH THE ENROLLMENT FORM. **PAY THE YEAR IN FULL (10 MONTHS) BY OCTOBER 31 AND RECEIVE A 10% DISCOUNT.**

I would like to enroll for the following classes, please list code numbers below:

CODE # _____

All students, parents/guardian are aware of possible injury that may occur during any dance class, performance, rehearsals, competition or any other studio related activity and are willing to assume those risks. I hereby release Tina Marie School of Dance, the owner, directors, staff and employees responsible for any damages or liabilities due to injury, accident, or property loss during or resulting from my child's participation in any function or activity through Tina Marie School of Dance. Tina Marie School of Dance has permission to use my child's photographs, images &/or video recordings on the Tina Marie School of Dance website, social media and in its publications.

PARENT/LEGAL GUARDIAN SIGNATURE _____

	Total # of Classes	_____
Am Exp _____ Discover _____ MasterCard _____ Visa _____	Tuition Amount	\$ _____
Name on card: _____	Registration Fee	\$ 15.00
Credit Card No: _____	3% Transaction fee - Credit Cards only	\$ _____
Expiration date: _____ / _____	Coupon / Discount	\$ _____
CCV (Security No): _____	Total Amount Paid	\$ _____
Signature _____	Check #	_____