

# 2010-2011 C & C Dance Company REGISTRATION FORM

DATE: \_\_\_\_\_

## I. PARENT INFORMATION

Parents Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City/State/Zip Code: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Emergency Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

## II. STUDENT INFORMATION

Please Check One:  New Student  Existing/Returning Student

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
 Does your child have any medical limitations that a teacher should be aware of?  Yes  No. If yes, please explain:  
 \_\_\_\_\_

## III. CLASS SELECTION(S)

<u>Class No.</u>	<u>Class Name</u>	<u>Day</u>	<u>Time</u>	<u>Staff Use Only</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

To be completed by C & C Staff : Monthly Tuition: \$ \_\_\_\_\_ Total Paid: \$ \_\_\_\_\_ Form: \_\_\_\_\_ Intls: \_\_\_\_\_

### Tuition & Fees

Registration Fee (new students only).....	\$30.00
Toddler Class.....	\$45.00 per month
45 minute class.....	\$48.00 per month
2 <sup>nd</sup> class or 2 <sup>nd</sup> child (45 minutes).....	\$45.00 per month
3 <sup>rd</sup> class or 3 <sup>rd</sup> child (45 minutes).....	\$43.00 per month
Costume Deposit (due November 1 <sup>st</sup> ).....	\$60.00 per costume
"Pro Dance Challenge Classes".....	\$ 18 per class or \$45 per month

Note: 45 minute classes are considered the first class when enrolling in both a 45 minute class and a 30 minute class.

**10% Tuition Discount when paid-in-full at time of registration (10 months)**

*No refunds will be given for tuition paid in full*

Registration fee (if applicable) and 1<sup>st</sup> month's tuition is due at time of registration. Payment may be made by major credit card, cash or check. Checks should be made payable to "C & C Dance Company."

**Classes begin September 13th, 2010. See you then!**

To be completed by C & C Staff : Monthly Tuition: \$ \_\_\_\_\_ Total Paid: \$ \_\_\_\_\_ Form: \_\_\_\_\_ Intls: \_\_\_\_\_

No: \_\_\_\_\_ Class: \_\_\_\_\_ Day/Time: \_\_\_\_\_ Room: \_\_\_\_\_ Teacher: \_\_\_\_\_

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