

DATE OF REGISTRATION: _____ STUDIO LOCATION: _____

FAME DANCE STUDIOS LTD.

BOX 1474, LLOYDMINSTER, SK, S9V 1K4//780-871-1494//e-mail: famedancestudios@gmail.com//www.famedancestudios.com

RECREATIONAL DANCE REGISTRATION FORM

PLEASE COMPLETE ONE FORM FOR EACH STUDENT REGISTERED

NAME OF STUDENT: _____

PARENT/GUARDIAN: _____

MAILING ADDRESS: _____ CITY: _____ PROV: _____ POSTAL CODE: _____

PHONE: (Home) _____ (Work) _____ (Cell) _____

E-MAIL: _____

STUDENT'S DATE OF BIRTH: (Month) _____ (Day) _____ (Year) _____

MEDICAL PROBLEMS: _____

REGISTRATION FEE: (NON-REFUNDABLE) please circle one

SINGLE STUDENT: \$30.00 FAMILY RATE: \$35.00

YOUTH AND ADULT PROGRAMS:

CLASSES:

(Circle only those classes that the student will be attending this year)

* JAZZ * LYRICAL * JAZZ/LYRICAL COMBO * BALLET * HIP-HOP * HIP-HOP/BREAKDANCING * TAP * VARIETY

* TINY TOTS * TINY TOTS ACRO *

* JAZZ/BALLET COMBO * JAZZ/HIP-HOP COMBO * JAZZ/BALLET/TAP COMBO * JAZZ/BALLET/HIP-HOP COMBO *

* JAZZ/HIP-HOP/LYRICAL * HIP-HOP/BREAKDANCING COMBO * ACRO

AGE CATEGORIES:

(Please circle)

* 3-5 year olds (Tiny Tots) * 5-8 year olds *Pre-teen/Teen *Adults

CLASS PRICES:

1st class - SINGLE TERM: \$210.00 _____ FULL YEAR: \$380.00 _____

2nd class - SINGLE TERM: \$200.00 _____ FULL YEAR: \$360.00 _____

3rd class - SINGLE TERM: \$185.00 _____ FULL YEAR: \$325.00 _____

4th class - SINGLE TERM: \$168.00 _____ FULL YEAR: \$295.00 _____

5th class - SINGLE TERM: \$160.00 _____ FULL YEAR: \$285.00 _____

TINY TOTS (SINGLE TERM) _____ \$185.00

TINY TOTS (FULL YEAR) _____ \$315.00

TINY TOT ACRO (FULL YEAR) _____ \$315.00

TOTAL CLASSES: \$ _____

TOTAL OF ALL FEES: (per child)

TOTALS OF ALL DANCE FEES

\$ _____

LESS DISCOUNT OF _____ (5% OR 10% if applicable)

\$ _____ (list amount removed on this line)

REGISTRATION FEE

\$ _____

SUBTOTAL

\$ _____

GST @ 5% (Total x 1.05)

\$ _____

COSTUME DEPOSIT

(TINY TOTS: 60.00, TINY TOT ACRO: 65.00, ALL OTHER STUDENTS 80.00)

\$ _____

GRAND TOTAL DUE

\$ _____ *GST#83427 7279

PAYMENT MUST ACCOMPANY REGISTRATION FORM EITHER IN FULL OR BY WAY OF POSTDATED CHEQUES (Maximum 6)

AUTHORIZED BY: _____

JAN ___ FEB ___ MAR ___ APR ___ MAY ___ JUNE ___ JULY ___ AUG ___ SEPT ___ OCT ___ NOV ___ DEC ___

RECOMMENDED BY: _____