

Fall 20 ___ SPRING 20 ___ SUMMER 20 ___
 Amt. Pd. _____
 Form of Pmnt. _____
 Date _____
 Initials _____



231.941.4244 Phone
 231.941.4355 Fax
 3811 Marketplace Circle
 Traverse City, MI 49684
www.danceartstraverse.com

To register by mail, send the registration with check, Visa/MasterCard/Discover numbers and expiration date to above address or Fax this information to DAA. Class sizes are limited & registration is accepted on a first come basis.

Student(s) Name: _____ Date of Birth (if minor): _____ Age: _____

Billing Address: _____

City/State: _____ Zip: _____ E-Mail: _____

Phone: (Home) _____ (Cell) _____ (Work) _____

Parent(s) Name: _____

List all prior dance training & any training you are currently receiving elsewhere (where, when, how long, style, etc.):

List any medical problems or injuries: _____

Please list the classes you wish to enroll in:

Class:	Day:	Time:	Teacher:	Tuition:	Costume:
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Sub – Total: _____

“Multiple class” discount: If prep-paid, subtract 10% (3-9 Classes) or 15% (10+ Classes): _____

Limited Rate (Max 12 hours/week) or Unlimited Rate (12+ hours per week). If prepaid, subtract discount: _____

Non-refundable family registration fee due with each registration semester, Add \$10: _____

TOTAL TUITION DUE: _____

Tuition payment is due at time of registration.

There will be no refunds after the 1st week of class – no credits – no transfers.

A monthly statement fee will be added to accounts with any outstanding balance.

Signature: _____ **(If minor child, parent must sign) Date:** _____

“I recognize that dance does involve a risk of harm or injury, therefore, I agree to hold Dance Arts Academy, its teachers and representatives, harmless from any injury I/my child may incur during my/my child’s training here. I have read and agree to abide by the policies and procedures and dress code of Dance Arts Academy.”