

A Terre School of Dance

2021 Student Registration Form

Semester: _____
Signup Date: _____

Student Information

Student's Name: _____ Date of Birth (MM/DD/YYYY): _____
Mailing Address: _____
Primary Phone: _____ Phone (2): _____
Name of Person responsible for paying fees: _____
Primary Email Address: _____
School District: _____

Medical

Allergies: _____
Will your child require any special medical attention or accommodations during a normal class: (yes/no)

If yes – Explain: _____

Legal Release and Policy Acceptance (please initial)

I have reviewed studio policies:

____ I/we understand the Studio Policies ____ I/we understand my billing obligations
____ I/we understand the risks related to dance ____ I/we understand my responsibilities for my property
____ I/we understand the dress code ____ I/we understand the schedule
____ I/we give media use rights permission ____ I/we understand the attendance policy

Signature / Responsible Party

Date

Classes (For A Terre Office/Do not write in the space below)

Class Name	Meeting Date(s) / Time	Fees / Minutes

Registration Fee: _____

Late Fee: _____

Tuition: _____

Costume Fee: _____

Discounts: _____

Damage Fee: _____

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Total Monthly Tuition _____

Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

Credit Card Information			
Card Type:	<input type="checkbox"/> MasterCard	<input type="checkbox"/> VISA	<input type="checkbox"/> Discover <input type="checkbox"/> AMEX
	<input type="checkbox"/> Other _____		
Cardholder Name (as shown on card): _____			
Card Number: _____			
Expiration Date (mm/yy): _____			
Cardholder ZIP Code (from credit card billing address): _____			

I, _____, authorize _____ to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

Customer Signature

Date

In lieu of credit card, I, _____ have provided a voided check. I authorize A Terre School of dance to debit monthly tuition for the aforementioned amount from the account provided on the 1st of every month.

Customer Signature

Date