

# ASPIRATIONS DANCE COMPANY REGISTRATION FORM

\*Each Student Requires a Separate Form\*

## FALL 2023/SPRING 2024

Dancer Full Name: \_\_\_\_\_

Age \_\_\_\_\_

Date of Birth \_\_\_\_\_

Parent or Guardian Name: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

CELL PHONE CARRIER for Text Reminders/Offeres **(REQUIRED)** \_\_\_\_\_

Email Address **(REQUIRED)** \_\_\_\_\_

Emergency Name & Phone \_\_\_\_\_

CLASS	DAY	START TIME

Total Number of Classes	
Amount of Discount	
<b>Total Monthly Tuition</b>	<b>\$</b>

**A Credit Card is Required to be on File, to establish and Maintain a Studio Account, this account will be charged, if your account becomes past due for Tuition, Costumes or any studio costs within (30) days of the published due date.**

**2% Discount for CASH or CHECK PAID by the 1<sup>st</sup> of the MONTH**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_