



1358 CAPE ST. CLAIRE ROAD · ANNAPOLIS · MD · 21409 · (410) 757-0599

Family Registration

PARENTS: _____

ADDRESS: _____

HOME PHONE : _____

WORK PHONE: _____ ext _____

CELL PHONE: _____

E-MAIL: _____

	Student Name	Birth Date	I am beginning my
1.	_____	___/___/___	_____ year of dance
2.	_____	___/___/___	_____ year of dance
3.	_____	___/___/___	_____ year of dance

My child will be participating in the June recital. Please bill our account accordingly. Y N

Please enter all classes, including days and times, you wish to register your family for this dance season.

Student Name	Class Name	Day	Time	Monthly Tuition
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
			Monthly Administrative Fee	+ \$10.00
			Subtotal	_____
			Less Discounts	- _____
			Total Monthly Tuition	_____

**Please enclose your REGISTRATION FEE, SEPTEMBER 2007 &
JUNE 2008 PAYMENTS made payable to:**

Annapolis Dance Factory