



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

## Regular Session 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

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	- _____
	<u>Total Monthly Tuition</u>	_____
	x 2	_____
	Registration Fee	_____
	<u>Total Due at Registration</u>	_____

Please enclose your REGISTRATION FEE,  
 SEPTEMBER & JUNE PAYMENTS  
 made payable to:  
**Annapolis Dance Factory**