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# SPOTLIGHT DANCE CENTRE REGISTRATION FORM 2016/2017

The form below is for registration for Spotlight Dance Centre for the 2016/2017 Season.

**For our families that are on the Pre-Authorization Plan:** Please fill out the form and e-mail back to the studio before June 10<sup>th</sup>, 2016. Your account will be charged the \$15 early registration fee and will be deducted on June 15<sup>th</sup>. Your monthly fees will begin being processed in September. Please look out for your confirmation e-mail that will be sent 48 hours after receiving registration. Please contact the office, if you have not had confirmation after that time. *If you register after June 10<sup>th</sup>, registration fees must be paid in person (or dropped off through the studio mail slot).*

**For our families that give Postdated Cheques or Pay in Person:** Please fill out the form and print or e-mail to the studio, bring in your registration fee, as well as, your September fees (can be dropped off through the studio mail slot). Please note: if you e-mailed your form, placement in class will NOT be confirmed until payment for registration and September is received.

DATE: \_\_\_\_\_ REGISTRATION FEE PER CHILD: EARLY \_\_\_\_\_ LATE \_\_\_\_\_

## PERSONAL INFORMATION (REQUIRED)

**CHILDREN'S FULL NAME** \_\_\_\_\_ **DATE OF BIRTH** \_\_\_\_\_ **AGE** \_\_\_\_\_

STUDENT #1

STUDENT #2

STUDENT #3

**PARENTS NAME:**

**PARENT NAME:**

ADDRESS:

CITY:

POSTAL CODE:

HOME PHONE:

CELL PHONE:

EMAIL ADDRESS:

EMAIL ADDRESS:

**EMERGENCY CONTACT: NAME:**

**PHONE:**

## CLASS DETAILS (Required)

**STUDENT #1:**

	FIRST CLASS	SECOND CLASS	THIRD CLASS
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			

**STUDENT #2:**

	FIRST CLASS	SECOND CLASS	THIRD CLASS
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			

**STUDENT #3:**

	FIRST CLASS	SECOND CLASS	THIRD CLASS
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			

**TOTAL FEES**

Child's Name	Class Length	FEES
Child's Name	Class Length	FEES
Child's Name	Class Length	FEES

**TOTAL MONTHLY FEES:**

DISCOUNT FAMILY

PAY FULL YEAR:

**PAYMENT METHOD**

<b>PAY YEAR IN FULL 2% DISCOUNT</b>	<b>RECEIPT#</b>
<b>POSTDATED CHEQUES</b>	<b>RECEIVED ON:</b>
<b>PRE-AUTHORIZED PAYMENT PLAN</b>	<b>RECEIVED ON/PAP#</b>
<b>CASH IN PERSON MONTHLY</b>	<b>RECEIPT#</b>

**PRE-AUTHORIZED PAYMENT:**

I, \_\_\_\_\_, authorize the deduction of funds for the Pre-Authorized Payment Plan for Spotlight Dance Centre. I understand that all funds, will be withdrawn at the beginning of each month beginning in September 2016 and continuing through to June 2017.

Signature:

Date:

**COMPETITIVE STUDENTS ONLY: For any competitive students wishing their extra fees to be deducted from their credit card, please fill out the information below.**

**CREDIT CARD:****EXPIRY DATE:**

Authorization Signature of Card Holder

Once all information is filled out and complete. You may now e-mail off your completed form below or print off and return to the studio to await for your confirmation e-mail. **If the submit form button does not work with your computer, please save as a PDF, and e-mail to the studio.** If you have any questions please contact the studio at **604.299.6111**. Thank you

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