

Date Received:	Reference #	PAP#
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## SPOTLIGHT DANCE CENTRE REGISTRATION FORM

**PRE-AUTHORIZED PAYMENT:** For those families that have a Pre-Authorized Payment account with us. Please fill out the form, Save the form to your computer and E-mail to the Studio. You will be contacted with in 48 hours to confirm your registration and registration fees will automatically be debited for June 15<sup>th</sup>. Monthly payments will begin in the first week in September.

**NEW REGISTRATION OR POSTDATED/CASH PAYMENT:** For those families that are new to the studio or pay with postdated cheques or cash. Registration must be made in person. You can still fill this form, save and e-mail to the studio, however, registration will not be confirmed until Registration fees and September fees are confirmed.

Early Bird Registration

Late Registration

### STUDENT INFORMATION: Please complete and fill all following information

CHILD'S FULL NAME:	AGE:	BIRTHDATE:
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
CHILD'S FULL NAME:	AGE:	BIRTHDATE:
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
CHILD'S FULL NAME:	AGE:	BIRTHDATE:
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
CHILD'S FULL NAME:	AGE:	BIRTHDATE:
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

### PARENT/GUARDIAN INFORMATION: Please complete and fill all the following information

PARENT'S FULL NAME:	E-MAIL:	PHONE:
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
PARENT'S FULL NAME:	E-MAIL:	PHONE:
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
CHILDREN'S STREET ADDRESS: <input style="width: 95%;" type="text"/>		
CITY/PROVINCE: <input style="width: 95%;" type="text"/>		
POSTAL CODE: <input style="width: 95%;" type="text"/>		

### CLASSES: Please choose classes for each of the children

	CLASS #1	CLASS#2	CLASS #3
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			

	CLASS #1	CLASS#2	CLASS #3
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			

	CLASS #1	CLASS#2	CLASS #3
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			

	CLASS #1	CLASS#2	CLASS #3
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			

**PAYMENT INFORMATION: Please check your method of payment**

All monthly fees can be paid by Pre-Authorized Payment (Void cheque)/ Postdated Cheques/ Cash Monthly. All fees are due and must be paid for the first of the Month. Ballet Program Fees, Recital Costume Fees and Photo Fees can be paid directly to the office by Cash or Cheque.

**PRE-AUTHORIZED PAYMENT** VOID CHEQUE RECEIVED:  PAP#

I, \_\_\_\_\_ authorize Spotlight Dance Centre to debit from my personal account monthly the tuition for my child's dance classes for the months September 1<sup>st</sup>- June 25<sup>th</sup>.

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

**POSTDATED CHEQUES** CHEQUES RECEIVED: SEPT OCT NOV DEC JAN FEB MAR APRIL MAY JUNE

**CASH MONTHLY** REGISTRATION RECEIPT#

**FULL YEAR PAYMENT** RECEIPT #  Discount Fee Total: \_\_\_\_\_

**TOTAL MONTHLY PAYMENT**

**TOTAL MONTHLY FEES:**

Family Discount Monthly Fees (Total of 6 Classes or More):

**COMPETITIVE STUDENTS ONLY: Please fill information for credit card payment**

FOR COMPETITIVE STUDENTS ONLY: All extra fees (not including monthly tuition) can be paid on credit card. For your convenience, if you would like to keep your credit card information on file, please fill out the following information.

Credit Card Type:    Visa    Mastercard

Credit Card Number: \_\_\_\_\_

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

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

SUBMIT FORM TO SPOTLIGHT DANCE CENTRE: