

CLASSES BEGIN MONDAY, SEPTEMBER 10, 2018

Last Name: _____ Parent Name(s): _____

Address: _____ City _____ Zip _____

Phone Numbers Home: (____) _____ Work : (____) _____
 Cell: (____) _____

Emergency Contact Name: _____ Phone Number: _____

E-Mail: _____

Student Name: _____ Birthdate: _____

Class and Level	Day and Time	No. of hrs.

Student Name: _____ Birthdate: _____

Class and Level	Day and Time	No. of hrs.

Total Weekly Hours: _____ Total Monthly Tuition: _____

The first month's tuition, a \$80.00 Costume Fee and \$25.00 registration fee (yearly registration fee) is due upon registration. Thank You