

Dear Parents and Students,

We are now accepting registration for our fall semester 2017. Our fall schedule will be made from your requests. Classes will be filled on a first come, first serve basis.

To Register, complete the form below and forward it to the studio, along with a \$25.00 registration deposit. Cheques can be made payable to Coastal Dance Company. All deposits are non-refundable.

Please return this form and your fee to: Coastal Dance Company | 16 Stavanger, Unit 4 | St. John's, NL | A1A 5E8

GENERAL INFORMATION

STUDENT'S NAME: _____ DATE OF BIRTH: DD | MM | YYYY

PARENT/GUARDIAN'S NAME: _____

PRIMARY PHONE: _____ MOBILE: _____ WORK: _____

EMAIL: _____

MAILING ADDRESS: _____

ALLERGIES OR MEDICAL CONDITIONS: _____

DANCE EXPERIENCE: _____

HOW DID YOU HEAR ABOUT COASTAL? _____

CLASS SELECTIONS

GENERAL CLASSES

- | | |
|---|--|
| <input type="radio"/> MOMMY & ME (ages 1.5–3) | <input type="radio"/> PRE-BALLET (ages 2–5) |
| <input type="radio"/> BALLET (age 6+) | <input type="radio"/> POINTE (at teacher's discretion) |
| <input type="radio"/> JAZZ/HIP-HOP (ages 5–6) | <input type="radio"/> JAZZ (age 7+) |
| <input type="radio"/> BROADWAY JAZZ (age 8+) | <input type="radio"/> JAZZ FUNK (age 13+) |
| <input type="radio"/> HIP-HOP (age 7+) | <input type="radio"/> BOYS HIP-HOP (age 4+) |
| <input type="radio"/> MODERN (age 7+) | <input type="radio"/> BREAK DANCING (age 7+) |
| <input type="radio"/> TAP (age 4+) | <input type="radio"/> ACRO (age 6+) |

EXAM CLASSES

- MODERN
- BALLET
- TAP

ADULT CLASSES

- ADULT TAP
- ADULT BURLESQUE (age 18+)

TIME PREFERENCE

- WEEKEND WEEKDAY NONE

Please select here **ONLY** if you do **NOT** give permission for your child's photo/video to appear in possible Coastal Dance Company publicity images, including postings on the website and/or social media.

PARENT/GUARDIAN SIGNATURE: _____

Please complete the form below if you wish to keep your credit card on file for automatic payment of tuition and/or costume fees.

- I authorize Coastal Dance Company to charge my credit card for tuition fees.
- MONTHLY (single-term fees divided into 3 monthly payments) TERM
- I authorize Coastal Dance Company to charge my credit card for costume deposits in the month of December at \$50 per costume, per dance. By checking this option, I agree to purchase of each costume in its entirety.
- I would like additional costume payments withdrawn monthly. Payments will be withdrawn until the costume(s) is/are paid in full.
- AMOUNT: _____
- I authorize Coastal Dance Company to charge my credit card for costume remainders and final payments charged in March.

CREDIT CARD INFORMATION

VISA MASTERCARD

CARD NUMBER: ____ / ____ / ____ / ____

EXPIRY: MM|YYYY CVV: ____

NAME ON CARD: _____

CARDHOLDER'S SIGNATURE: _____

DATE: _____

2017 Registration Form

Class Assignments (office use only)

This portion of the registration form will be filled out by Coastal Dance Company.

CLASS	DAY & TIME	COST
		TOTAL