

NORTH SHORE DANCE STUDIO 2019-2020 RECREATION DANCE REGISTRATION FORM

STUDENT'S NAME:	AGE:
BIRTHDATE:	SCHOOL:
	GRADE:

CLASS	LEVEL	DAY	TIME	HRS/WEEK

TOTAL HOURS/WEEK

SEMESTER I TUITION \$

TUITION IS BASED ON TOTAL HOURS PER WEEK FOR A DANCER/FAMILY PER SEMESTER

NUTCRACKER FEES \$70
EVERYONE IS AUTOMATICALLY ENROLLED FOR NUTCRACKER UNLESS SPECIFICALLY NOTED

YES	NO
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TOTAL DUE AT REGISTRATION
\$

HRS/WEEK	\$/SEM
TOT TIME	175
MOM & ME	175
45 MIN	220
1	285
1 1/4	350
1 1/2	415
1 3/4	480
2	545
2 1/4	610
2 1/2	675
2 3/4	740
3	805
3 1/4	870
3 1/2	935
3 3/4	1000
4	1065
4 1/4	1130
4 1/2	1195
4 3/4	1260
5	1335
5 1/4	1390
5 1/2	1455
5 3/4	1520
6	1585
6 1/4	1650

PARENT:
ADDRESS:
CITY/ZIP:
HOME PHONE:
PARENT CELL:
PARENT E-MAIL:

I ASSUME FULL LIABILITY FOR ANY LOSS OF PERSONAL PROPERTY OR INJURY ON THE DANCE STUDIO PREMISES. I UNDERSTAND THAT PAYMENT IN FULL OR THE MONTHLY AUTO PAY PLAN IS REQUIRED TO BE A STUDENT AT NSDS, AND WILL COMPLY WITH THE REFUND AND PAYMENT POLICY. REGARDLESS OF PAYMENT OPTION, CREDIT CARD INFORMATION MUST BE PROVIDED AT THE TIME OF REGISTRATION. REFUNDS ARE ONLY GIVEN IF WE ARE UNABLE TO PLACE YOUR CHILD IN CLASS, AN ILLNESS OR INJURY LEADING TO WITHDRAW FROM CLASS, OR IF THE FAMILY HAS MOVED OUT OF TOWN. I UNDERSTAND THAT TUITION IS NON-REFUNDABLE AND THAT REGISTRATION IS ONLY FINALIZED WHEN COMPLETED FORMS AND PAYMENT HAVE BEEN RECEIVED.

SIGNATURE: DATE:

*BALANCE MUST BE PAID IN FULL IN ORDER TO RECEIVE COSTUMES.

10433 BAHER RD. MECUON 53092
262-242-4077

NORTHSHORE-DANCESTUDIO.COM
NORTHSHOREDANCESTUDIO@HOTMAIL.COM (GENERAL)
NORTHSHOREDANCEBILLS@HOTMAIL.COM (BILLING)

DATE	METHOD	\$PAID	\$DUE	PAID IN FULL
				PAYMENT PLAN
				PP AMOUNT
NAME ON CARD				EXP
CREDIT CARD NO.				CVV

NOTES:

RECREATIONAL FORM