

# RECREATION FORM

<b>Student's Name:</b>	<b>Age:</b>
<b>Birthdate:</b>	<b>School:</b>
	<b>Grade:</b>

Class	Level	Day	Time	Hrs./Week

**Total Hours/Week**

**Semester II Tuition \$**

Tuition is based on total hours per week for a dancer/family per semester

**Recital Costumes**

DB & E Jazz \$65 x \_\_\_\_\_ \$

Level I & Up \$75 x \_\_\_\_\_ \$

**Total Due at Registration**

\$

Date	Method	\$ Paid	\$ Due	Payment Plan
				PP Amount
				Duration
Name on Card				EXP
Credit Card No.				CVV

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
6 1/2	1715
6 3/4	1780
7	1845
7 1/4	1910
7 1/2	1945
7 3/4	2040
8	2105

<b>Parent:</b>
<b>Address:</b>
<b>City/Zip:</b>
<b>Home Phone:</b>
<b>Parent Cell:</b>
<b>Parent E-Mail:</b>

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 NSPS, 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.

I have completed and signed the Waiver regarding to COVID-19

**I have read and agreed to the Covid Waiver**

<b>Signature:</b>	<b>Date:</b>
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10433 N Baehr Road Mequon, WI 53092  
262-242-4077  
northshore-dancestudio.com  
northshoredancestudio@hotmail.com (general ?)  
northshoredancebills@hotmail.com (accounting ?)

**Notes:**

RB \_\_\_\_\_ EM \_\_\_\_\_ OB \_\_\_\_\_ QB \_\_\_\_\_