

KOLOTOV DANCE STUDIO

611 North Maple Ave, Suite 11, Ho Ho Kus, NJ 07423 201-444-3223 kolotovdance@gmail.com

SUMMER CLASSES 2017 REGISTRATION FORM

Child's Name _____

Address _____

City _____ State _____ Zip Code _____

Home # _____ Cell # _____

Email _____

Birth Date _____ Age as of June 5, 2017 _____

Parent's Name(s) _____

How did you hear about us? _____

PHOTO RELEASE

I give permission for my child's photo and likeness to be used for publicity purposes and website for Kolotov Dance Studio.

____ Yes ____ No

TEXT ALERTS

Would you like your cell number to be used for emergency text message alerts?

____ Yes ____ No

Please circle all that apply:

LEVEL:	Pre Ballet (3-4 years) 9:45am-10:30am	Ballet I/II (5-6 years) 10:30am-11:30am	Ballet III (7-9 years) 11:30am-1:15pm
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SESSION(S):	Session 1 (June 10, 17, 24) Deadline Sat. 6/3	Session 2 (July 8, 15, 22, 29) Deadline Sat. 6/24	Session 3 (Aug 5, 12, 19) Deadline Sat. 7/29
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RATES:

Pre Ballet	Session 1: \$65	Session 2: \$85	Session 3: \$65
Ballet I/II	Session 1: \$80	Session 2: \$100	Session 3: \$80
Ballet III	Session 1: \$90	Session 2: \$110	Session 3: \$90

TUITION

Tuition is due upon registration.

Total Due: _____

Date Paid: _____

PAYMENT INFORMATION

Cash ____ Check ____ Credit Card ____

____ **Yes, please charge my card for the balance**

Card #: _____

Exp. Date: _____ CVV#: _____

AGREEMENT AND SIGNATURE

I understand there are no refunds for any portion of tuition paid.
I understand that Kolotov Dance Studio is not responsible for any injuries my child sustains at the studio.

Parent's Signature: _____