

JazzWorX

JAZZ TAP BALLET HIPHOP BREAKDANCE CONTEMPORARY

REGISTRATION FORM 2008-09

Student Name: _____ Age _____ DOB _____
 Address: _____
 City: _____ State: _____ Zip: _____
 E-Mail: _____ Phone: _____
 Work: _____ Cell: _____

CLASS SELECTION

Day	Class	Time

RATES

Adults

10 Class Card _____ \$180
 20 Class Card _____ \$340
 30 Class Card _____ \$480
 Drop In \$ 20 per class

Cards good for 3 months from date of purchase.

- Tuition due prior to admittance to class
- No refunds.

PAYMENT

Tuition: _____
 Registration Fee: + _____
 (\$25.00/new students only)
 Applicable discounts: _____
 Total Due: _____
 Payment Received: _____
 Balance Due: _____

**Thanks for dancing
at Jazzworx!**

Payment Method:

Check # _____ Master Card & Visa accepted at the studio.
 Date _____
 Amount _____
 Cash _____

I hereby release Jazzworx Dance Center and its instructors from all claims of liability while I or my child(ren) dance at this facility. I realize that Jazzworx Dance Center is not responsible for personal injury or lost property. Also, by signing below I agree to the terms of my payment schedule as well as all studio policies and understand that failure to comply may result in dismissal from the program.

Signature _____

Date _____

