

Center for Performing Arts Dance Studio & Acting School

Student Registration Form

Student's first, middle and last name:

Student's age:

Student's date of Birth:

Student's street address:

Student's City, State and Zip:

*E-mail Address:

Cell Phone:

Home Phone:

Mother's Name:

Father's Name:

***Total number of years at CPAM (include this year):**

***New Students – How did you find our school?**

List the student's physical limitations or allergies:

Is the student covered by medical insurance?

I acknowledge that the Center for Performing Arts Dance Studio and Acting School and its instructors are not liable for any injuries that may occur while any student or family member is on the premises. Nor are they liable for any lost or stolen property. Signature:

<u>Class Day</u>	<u>Class Name</u>	<u>Class Level</u>	<u>Class Time</u>	<u>Length of Class (hours/min.)</u>	<u>Total Hours</u>
1.					.
2.					.
3.					.
4.					.
5.					.
6.					.
7.					.
8.					.

➡ Please call **978-975-7668** to make tuition payment arrangements.

***Information below will be completed by CPAM staff:**

Early Tuition Amount \$ _____ Regular Tuition Amount \$ _____ Late Tuition Fee \$ _____

***Tuition must be kept up to date in order for the student to participate in lessons.**

***Average Costume price is \$55. A \$45 Deposit for each costume is due between September 8th and November 15th 2009 or the student's costumes cannot be ordered. Total number of costumes _____ Deposits: _____**

September October November December January February March April May June Summer