

Juliart Dance Studio
 83 E. Long Lake Rd., Troy, MI 48085
 248-828-7841
www.juliartdance.com

Enrollment Form

To enroll, please fill out and return to the studio with a \$10.00 non-refundable registration fee per student (\$15.00 per family), as well as your first month's tuition. **Classes begin on Monday, September 12th.**

Student's Name _____ Girl _____ Boy _____
 Parent's Names _____
 Address _____
 City _____ Zip _____
 Home Phone _____ Alt. Phone _____
 E-Mail Address _____
 Would you like to receive alerts and reminders via this email address? _____
 Birth date _____
 How did you hear about Juliart? _____

Classes to be taken:

Name _____	Day _____	Time _____	Studio _____	Class _____
Name _____	Day _____	Time _____	Studio _____	Class _____
Name _____	Day _____	Time _____	Studio _____	Class _____
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Name _____	Day _____	Time _____	Studio _____	Class _____
Name _____	Day _____	Time _____	Studio _____	Class _____

Class fees are as follows:

All 30 minute classes	\$ 30.00
1- 45-min class	\$ 40.00
2- 45-min classes	\$ 75.00
3- 45-min classes	\$100.00
4- 45-min classes	\$125.00
Additional 45-min classes	\$ 20.00
For each one-hour class add	\$ 6.00

***Boys dance at 1/2 price!**

All tuition is due by the first of the month. Any tuition not received by the 10th will be assessed a \$15 late fee. A costume deposit of \$60.00 per class is due November 30th for all students participating in the annual recital. Any costume/tight balances will be due January 12th, 2012.

All students and the parents/legal guardians are aware of possible injury that may occur during dance classes, performances, and/or rehearsal and are willing to assume those risks. It is agreed that students and their parents/legal guardians will not hold Juliart Dance Studio liable for injuries sustained while in attendance or while participating in any Juliart Dance Studio activity.

I understand that all students performing in the annual recital in June are required to participate in dress rehearsal. This is considered a mandatory rehearsal and not attending may affect your ability to perform in the recital.

Parent/Legal Guardian Signature _____ Date _____

Student's Signature _____ Date _____

For Office Use Only:

Monthly Tuition: _____ No. of Classes: _____ Date Entered: _____ Entered By: _____

Registration: _____ First Month: _____ Check Number: _____ Check Amount: _____