



REGISTRATION FORM 2018-2019

15933 Manchester Rd • Ellisville, Mo. 63011 • Phone: 636-394-0023

email: danceincorporated@att.net website: dance-inc.com facebook: Dance Inc instagram: [dance_incorporated](https://www.instagram.com/dance_incorporated)

REGISTRATION accepted at the front desk, by phone, mail or online at www.dance-inc.com

Date _____

Returning Student

New Student: how did you hear about us? _____ referred by: _____

Student's Last Name _____

First Name _____

Birthday Mo/Day/Yr _____

Parent's Name _____

Phone _____

Cell Phone _____

Address _____

City _____

State _____

Zip _____

EMAIL - VERY IMPORTANT

All information pertinent to students is sent via email

Class No. _____

Subject _____

Day _____

Time _____

Length of Class _____

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TOTAL HOURS PER WEEK _____

SELECT FUTURE MONTHLY PAYMENT METHOD

CHECKING ACCOUNT
AUTOMATIC PAYMENT

Tuition payment made by electronic check direct bank transfer to Dance Incorporated. Tuition payments must be received by the first week of each month. Use the following information to set up direct transfer:

Dance Incorporated	Routing # 071102568
15933 Manchester Rd.	Account # 2370000066
Ellisville, MO 63011	
Phone 636-394-0023	

**REGISTRATION FEE & ONE MONTH'S TUITION MUST BE INCLUDED
REFER TO HOURLY TUITION TABLE ON BACK**

Tuition \$ _____

Registration Fee (Non-refundable) \$40 \$ _____

Reg. Fee per add'l family member \$25 \$ _____

TOTAL ENCLOSED \$ _____

CREDIT CARD
AUTOMATIC PAYMENT

Tuition payments are automatically charged within the first week of every month

3% MONTHLY FEE WILL BE ADDED TO THESE TRANSACTIONS

BI-ANNUAL PAYMENT

Tuition payments are made via cash, check or credit card twice per season. Payments are due September 1 and January 15

CREDIT CARD AUTOMATIC PAYMENT INFORMATION

Visa Mastercard Discover

_____ Credit Card Number

_____ Exp. Date

_____ CVW#

_____ Address

_____ City

_____ State

_____ Zip