

**Gotta Dance by Miss Amy** (585) 354-2320  
 28 b West Bank Street, Albion, NY 14411  
 www.MissAmyNews.com or missamydance@yahoo.com

Parent/Gardian: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

circle one	Circle Length	Circle Day	Time	Studio
Tap	30 - 45 - 60 - 90	M T W TH	_____	A or B
Jazz	30 - 45 - 60 - 90	M T W TH	_____	A or B
Ballet	30 - 45 - 60 - 90	M T W TH	_____	A or B
Other _____	30 - 45 - 60 - 90	M T W TH	_____	A or B
Other _____	30 - 45 - 60 - 90	M T W TH	_____	A or B

**2nd Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

Circle one	Circle Length	Circle Day	Time	Studio
Tap	30 - 45 - 60 - 90	M T W TH	_____	A or B
Jazz	30 - 45 - 60 - 90	M T W TH	_____	A or B
Ballet	30 - 45 - 60 - 90	M T W TH	_____	A or B
Other _____	30 - 45 - 60 - 90	M T W TH	_____	A or B
Other _____	30 - 45 - 60 - 90	M T W TH	_____	A or B

**3rd Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

Circle One	Circle Length	Circle Day	Time	Studio
Tap	30 - 45 - 60 - 90	M T W TH	_____	A or B
Jazz	30 - 45 - 60 - 90	M T W TH	_____	A or B
Ballet	30 - 45 - 60 - 90	M T W TH	_____	A or B
Other _____	30 - 45 - 60 - 90	M T W TH	_____	A or B
Other _____	30 - 45 - 60 - 90	M T W TH	_____	A or B

Registration fee \$10 for first child in the family and \$5 for each additional family member in the same household.

*Tuition is due the first of the month with the first payment applied to your last, final payment.*

**Payment Options: Please Check One**

\_\_\_ Payment in Full Semester 1 \_\_\_\_\_ Semester 2 \_\_\_\_\_

\_\_\_ Monthly Payments Direct Debit Only

(Total 9 if able to operate September - May)

*To avoid a \$5 late fee, make sure we receive your payment by the 5th th of each month.*

Total # of Classes / Household	30 minute	45 minute	60 minute	90 minute	mom/me
1 Class	\$31	\$36	\$41	\$47	\$34
2 Classes	\$30	\$35	\$40	\$46	\$34
3 Classes	\$29	\$34	\$39	\$45	\$34
4 Classes	\$28	\$33	\$38	\$44	\$34

Accounts must be current to receive costumes and paid in full to participate in the recital.

**Registration Fee:** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

**Final Payment:** \_\_\_\_\_

**Other:** \_\_\_\_\_

**Total Today's Pymt** \_\_\_\_\_ **Receipt Number** \_\_\_\_\_

**Payment Method:** Check \_\_\_\_\_ Cash \_\_\_\_\_ Credit Card \_\_\_\_\_

**Parent/ Guardian Signature:** \_\_\_\_\_

**Please indicate any health concerns or conditions we should be aware of:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

