

Triangle Dance Center 2017-2018 Registration Agreement

Please return this form with Registration Fee and June 2018 payment to Triangle Dance Center:

By mail: 381 Triangle Rd., Ste. 7, Hillsborough, NJ 08844 • By email: info@triangledance.com

In Person: Tuesday, Wednesday, Thursday July 18th-27th 5-8 pm

Parent/Guardian _____

Street Address _____

City, State, Zip _____

Home Phone _____ Cell Phone/Work Phone _____

E-mail Address – Required (Monthly statements and other important notices will be emailed to you throughout the year.) _____

STUDENT #1

Student's Name _____ Date of Birth _____/_____/_____

School _____ Grade in School _____

Please enroll me in the following classes: _____

List any allergies or medical conditions. _____

STUDENT #2

Student's Name _____ Date of Birth _____/_____/_____

School _____ Grade in School _____

Please enroll me in the following classes: _____

List any allergies or medical conditions. _____

Payment Information (please use reverse side for credit card payments)

- Registration Fee and June 2018 Tuition are due with Registration and are non-refundable and non-transferrable.
- The yearly Registration Fee is \$25 per student or \$45 per family.
- A 10% monthly tuition discount is offered to students taking more than one class or to families with more than one child enrolled.
- There is a 5% discount if you choose to pay the year in full at the time of registration. No exceptions.
- Triangle Dance Center accepts cash, checks (made payable to Triangle Dance Center) and VISA, MasterCard and Discover.
- There is a \$25 fee for all returned checks.

Class Offerings Students should be the required age by October 1st to participate. Please check ✓ class selection(s).

Combo & Dance Classes

Class Length

- | | |
|---|-------------|
| <input type="checkbox"/> Dancing Together (ages 2-3) | 30 mins. |
| <input type="checkbox"/> Creative Movement (ages 3-5) | 45 mins. |
| <input type="checkbox"/> Kindercombo - ballet, tap, intro. to jazz (ages 5-6) | 60 mins. |
| <input type="checkbox"/> Dancecombo - ballet, tap, jazz (ages 6-7) | 90 mins. |
| <input type="checkbox"/> Jazz/Tap Combo (ages 7 & up) | 60-90 mins. |
| <input type="checkbox"/> Ballet (ages 7 & up) | 45-60 mins. |
| <input type="checkbox"/> Ballet with Pre-Pointe | 75 mins. |
| <input type="checkbox"/> Ballet with Beginning Pointe or Pointe | 75-90 mins. |
| <input type="checkbox"/> Little Hop (ages 5-7), Hip-Hop I (ages 7-9),
Boys' Hip-Hop (ages 8+), Hip-Hop II (ages 10-13) | 45 mins. |
| <input type="checkbox"/> Lyrical I (ages 7-9), II (ages 10-13), III (ages 14 & up) | 45 mins. |
| <input type="checkbox"/> Musical Theater (ages 8-11) | 45 mins. |

Gymnastics Classes

- | | |
|--|----------|
| <input type="checkbox"/> Kindergym (ages 4-6) | 45 mins. |
| <input type="checkbox"/> Gymnastics (ages 7-9) | 45 mins. |

Tuition TDC offers a 10% multiple class discount.

- 1 - 30 minute class per week \$55 per month
- 1 - 45 minute class per week \$60 per month
- 1 - 60 minute class per week \$65 per month
- 1 - 75 minute class per week \$68 per month
- 1 - 90 minute class per week \$78 per month

Please enroll my child(ren) for Triangle Dance Center's (TDC) 2017-2018 season. June payment and registration fee are 100% non-refundable and non-transferrable and payable upon submission of this Registration Agreement. I agree to pay tuition on the first class of each month from September to May regardless of any absences. I understand that tuition is a yearly fee broken down into 10 equal installments and is not based on the number of classes given in any one month. If it becomes necessary to withdraw, I will give 30 days written notification to cancel this agreement. My child is in good health and is able to participate fully in this movement program. I hereby waive and release TDC, its agents, partners and/or any individuals on its staff from any and all claims for any injury or damages which may occur while my child is participating in TDC's programs. I have read and fully understand the policies outlined above and agree to such.

Signature _____ Date _____

Print Name _____

For Office Use Only

Today's Date _____ Payment Method _____
 Registration Fee _____ June '18 Pymnt _____
 Dancewear _____ TOTAL _____
 Class D/T _____



Credit Card Authorization Form

Please use this form to authorize Triangle Dance Center to process a credit card payment or to set up recurring credit card billing.

Please charge the credit card I have provided below (check all that apply):

A One-Time Charge of \$ _____ .

Recurring Charge

Please charge \$ _____ on or about the 1st of the month from _____ through May 2018.
Monthly Tuition Amount Start Month

Authorization

I hereby authorize Triangle Dance Center to charge the credit card provided for my child's monthly tuition. I agree that this charge will occur on or about the 1st day of each month as long as I am enrolled. **To terminate or change the recurring billing process, I must provide 14 days written notice.** I am the legal cardholder for this account and I am legally authorized to enter into this recurring billing agreement with Triangle Dance Center.

Customer Information

Name as it appears on card (please print clearly)

Billing Address (where your credit card statements are sent)

City, State, Zip

Card Number (VISA, MasterCard or Discover)

____ / ____ / ____
Exp. Date

Security Code on Back of Card

Card Holder Signature

Date