



## Registration Form

Easy Tuition Opt. \_\_\_ Auth CC \_\_\_ Account # \_\_\_\_\_

**Student's name:** \_\_\_\_\_ D.O.B. \_\_\_\_\_

**Student's name:** \_\_\_\_\_ D.O.B. \_\_\_\_\_

**Student's name:** \_\_\_\_\_ D.O.B. \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

**Mother's name:** \_\_\_\_\_ Home #: \_\_\_\_\_

Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

**Father's name:** \_\_\_\_\_ Home #: \_\_\_\_\_

Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

Student email (optional): \_\_\_\_\_

### **Emergency Contact(s):**

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Phone # \_\_\_\_\_ Phone # \_\_\_\_\_

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Phone # \_\_\_\_\_ Phone # \_\_\_\_\_

---

**Student Info:**

Medical Condition(s): \_\_\_\_\_

Allergies: \_\_\_\_\_

**Authorization to Charge Credit Card**

I herby authorize, as the undersigned, the irretrievable charge of my account balance to my credit card if the account on file goes thirty days past due. I understand and agree that past tuition is owned by me for services rendered and that I cannot dispute this charge for any reason, as this is a non-refundable expense.

**Credit Card:** Visa:\_\_\_\_ Master Card:\_\_\_\_ Discovery: \_\_\_\_ 3 digital security code\_\_\_\_\_

**Cardholder:** \_\_\_\_\_

**Account #:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

**Cardholder's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Easy Tuition: (Optional service)**

I herby authorize Paramount Dance Studios to automatically charge my monthly tuition to my credit card on file on the 1<sup>st</sup> of each month. I authorize the monthly debit in the amount of \$\_\_\_\_\_.

**Credit Card:** Visa:\_\_\_\_ Master Card:\_\_\_\_ Discovery: \_\_\_\_ 3 digital security code\_\_\_\_\_

**Cardholder:** \_\_\_\_\_

**Account #:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

**Cardholder's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Studio Information:**

Class Level \_\_\_\_\_ Day(s) \_\_\_\_\_

Additional Classes \_\_\_\_\_ Day(s) \_\_\_\_\_

Monthly Tuition \$ \_\_\_\_\_