

# CK Dance Academy

## Registration Form/Automatic Payment Consent Form

Circle one: Fall session      Summer Session 1      Summer Session 2

Student's Name \_\_\_\_\_ M/F \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Email \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

IMPORTANT – What brought you to register? \_\_\_\_\_

Newspaper, Phone book, Friend referred me, Health Fair, YMCA, Early Childhood Celebration, Saw sign from road, Brochure mailed to me, Watching a performance, etc.

Mom/Guardian \_\_\_\_\_ Dad/Guardian \_\_\_\_\_

Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

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

Class & Level Age Group	Day and Time Tuition	Amount
-------------------------	----------------------	--------

---

---

---

---

Method of payment:

Checking Account-attach voided check here

I hereby authorize Club Kicks, Inc. to initiate debit entries to my checking account. This authorization is to remain in full force and effect until Club Kicks, Inc. has received written notification from me of its termination in such time and in such manner as to afford Club Kicks, Inc. and depository a reasonable opportunity to act on it.

Signature \_\_\_\_\_

OR

Visa  MasterCard \_\_\_\_\_

Card Number Expiration Date \_\_\_\_\_

Card Holder's Signature \_\_\_\_\_

I have read and understand the "Policies & Procedures" and "Welcome to CK Dance" and agree to comply with all the information and policies I will not hold Club Kicks, Inc., its owners or any of its employees responsible for any personal injury or property loss.

Signature (parent or guardian if under 18) \_\_\_\_\_ Date \_\_\_\_\_

I am withdrawing from classes.

Signature (parent or guardian if under 18) \_\_\_\_\_ Date \_\_\_\_\_