

Today's Dance Center  
Sharp's Run Plaza  
Route 70 Medford, NJ 08055

08/09 CreateAbilities Fall Registration Form  
Ph: 609-953-0253 Fax: 609-953-7018  
www.todaysdancecenter.com

New Student or Returning Student

*Circle one please*

Registration Fee: \$25.00 1<sup>st</sup> Child

\$20.00 2<sup>nd</sup> Child

All Today's Dance Center Student's are required to re-register each new Fall term.  
Classes fill quickly, please register ASAP!

STUDENT LAST: \_\_\_\_\_ FIRST: \_\_\_\_\_  
AGE: \_\_\_\_\_ BIRTH Date: \_\_\_\_\_

PARENT or GUARDIAN FIRST: \_\_\_\_\_ LAST: \_\_\_\_\_  
PERSON RESPONSIBLE FOR PAYING BILLS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: (856 OR 609) \_\_\_\_\_ CELL/EMG (856 OR 609) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Please tell us how you found Today's Dance Center and CreateAbilities *Circle one please*  
Ad Lines Phone Book Internet Walking by Friend other \_\_\_\_\_

Please attach a copy of your child's IEP or a summary telling us what you would like us to know about  
your child's special needs.

---

---

---

PREVIOUS TRAINING: YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, where? Include Today's Dance Center

WHERE \_\_\_\_\_ HOW LONG \_\_\_\_\_ CLASSES \_\_\_\_\_

A non-refundable registration fee of \$25.00 per student each year. \$20.00 for additional children per family.  
The Registration fee, first and last month of tuition must be paid, in order to secure your child's place in class.

**Tuition Payment Plan** Tuition will be paid monthly. Tuition is \$55.00, due the first of each month.

Payments received after the 10<sup>th</sup> will be charged a \$15 late fee. Returned checks will incur a \$30 fee.

**PAYMENTS ARE NOT REFUNDABLE.**

I hereby understand that Today's Dance Center is not responsible for any damage, injury, or loss  
during the time spent in class or on the premises. Today's Dance Center has the right to hang and print  
photographs of TDC dancer's.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(Automatic credit card withdraws are available.)** If interested, please fill in information below.

Withdraw will occur Thursday evening before the 1<sup>st</sup> of each month.)

Yes, I am interested in the Automatic Credit Card Payment Plan.

Signature \_\_\_\_\_ Card: Visa or Master Card (circle one) Exp Date: \_\_\_\_\_

Card Number: \_\_\_\_\_ CVV2 (last 3 digits on back of card) \_\_\_\_\_