

The Dance Factory

"Where Dancers are made"

10 Vreeland Drive Suite # 104 & 108
Skillman, NJ 08558
609-252-0711 • www.dancefactory1.com

Registration Form

Dancer's Name _____

Class _____ Day and Time _____ Studio A or B

Class _____ Day and Time _____ Studio A or B

Class _____ Day and Time _____ Studio A or B

Class _____ Day and Time _____ Studio A or B

Class _____ Day and Time _____ Studio A or B

Mother's Name _____ Father's Name _____

Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____

Parent's place of business _____ Phone# _____

Birthday ____/____/____ School _____ Grade _____

E-mail address _____

Information The Dance Factory should know about your dancer (medical).

What benefits would you like your dancer to get from our program?

How did you here about The Dance Factory?

If your dancer is transferring from another studio, please list the studio and dance background.

I am enrolling _____ for The Dance Factory's Fall/Spring dance program.

I understand that tuition is based on an average of four classes per month, and I am responsible for payment of this tuition _____ by the first of the month, regardless of any absences. To cancel the agreement, I understand that a written notification is required prior to the month of withdrawal.

Please initial

_____ I understand that June tuition and Registration fee are non-refundable/non-transferable. No exceptions!

Signature _____ Date _____

Monthly Tuition _____ Start Date _____