Powell Dance Academy

Powell Dance Academy
459 Village Park Drive
Powell, OH 43065

Phone: 614-841-9230
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www.powelldanceacademy.com

Class Registration Form

Responsible Party (Parent) Last Name: _____ First: _____

Students' Names: _____

Student	Class Name	Day/Time	Session	Teacher	Length	Tuition

Tuition Payment Options, *please choose one*

❑ Pay Year In Full (5% discount): No late fees, no transaction fees. ****cash or check only***
Discount not valid after October 31st.

❑ Monthly Self Pay: No charge, subject to $20 late fee & fee of 3% on ***FULL balance .***
current credit card info must be kept on file with PDA.

❑ Monthly Auto Pay: No late fees, subject to $1.25 transaction fee per class.
By signing below, I authorize Powell Dance Academy to charge the credit card I have on file.

_____

Subtotal	
Unlimited Tuition	
Less Discount	
Registration Fee	**$35**
Dancewear & Misc.	
Balance Due	
Paid	

I understand tuition for this program totals $ _____, due in 10 (September-June) equal monthly payments of $_____ , regardless of the number of classes per month, and that if I choose to withdraw from the program, written notice is required. ABSOLUTELY NO REFUNDS on tuition & related fees or penalties, dance shoes and Recital related items, including but not limited to tickets. No refunds will be given for classes missed prior to written notice of withdrawal. Tuition is due the 1st of each month; a $20.00 late fee will be added after the 10th. **No exceptions.** There is a $35 NSF fee for all returned checks. On the last day of the month, any remaining balance will be charged to the credit card on file with the PDA office including a 3% transaction fee. I have read, and agree to abide by the rules, policies and dress codes outlined in the Powell Dance Academy brochure.

X Signature _____ **Date** _____

Office use only: Enrolled? **Y** or **N** ~ Forms? **Complete/Incomplete** ~ Paid? **Y or N** Cash_____ Check #_____ CC Date _____ Initials _____