



**DEBORAH'S STAGE DOOR CENTER FOR THE PERFORMING ARTS
FALL REGISTRATION FORM – 2009-2010
1655 W. Hamlin. - Rochester Hills, Mi. 48309 248-852-8133**

CLASSES BEGIN ON SEPTEMBER 14, 2009.

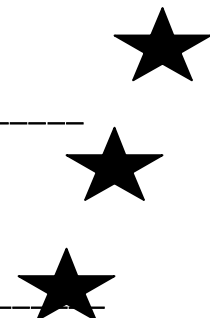
Please fill out and return this registration form with a \$12.00 non-refundable registration fee per student.

Student's Name _____
Address _____ **City** _____ **Zip** _____
Code _____

Parent's Names _____
Home Phone _____ **Work Phone** _____
Pager/Cell _____

E-Mail Address _____
First year you were enrolled at Deborah's Stage Door _____ **Boy** _____
Girl _____

Birthdate _____ **Age** _____ **Grade** _____
How did you hear about DSD _____



CLASSES TO BE TAKEN:

DAY _____	TIME _____	TYPE _____
DAY _____	TIME _____	TYPE _____
DAY _____	TIME _____	TYPE _____
DAY _____	TIME _____	TYPE _____
DAY _____	TIME _____	TYPE _____

Total Tuition Due for September _____

Earn DSD Bucks

For every new student that you refer to DSD for our 2009-2010 year -that attends classes for 3 months - you will earn \$25 in DSD credit. It can be applied to any DSD expense including

FALL CLASS FEES ARE AS FOLLOWS:**

1 CLASS	\$ 42.00
2 CLASSES	\$ 76.00
3 CLASSES	\$110.00
4 CLASSES	\$138.00

Referred By: _____
 (Current DSD Student)

IF TAKING MORE THAN 4 CLASSES, PLEASE ADD AN ADDITIONAL \$30.00 PER CLASS.

DANCE LINE REHEARSAL FEES ARE: \$40.00/mo. for Junioresettes
 \$45.00/mo. for Rep Co., SRC, Teen Rep. Co., Teen

Company, JRC

- \$40.00/mo. for all Performing Arts members
- \$40.00/mo. for all Show Choirs
- \$35.00/mo. for Children's / Jr. Ballet Company
- \$40.00/mo. for Sr. Ballet Company
- \$40.00/mo for DSD Frequency

*All students and the parents/legal guardians are aware of possible physical injury that may occur during dance/gymnastic classes, performances, and/or rehearsals and are willing to assume those risks. It is agreed that students, and their parents/legal guardians will not hold Deborah's Stage Door, Inc. its directors, officers, and/or employees liable for injuries sustained while in attendance or while participating in any Deborah's Stage Door activity. We give our permission to Deborah's Stage Door, Inc. to use pictures and videos of our child for advertising purposes and to contact us through email at the address above – or an updated address that we have supplied to the studio office. I understand that I am responsible for all late fees incurred when any payments are not made on time.

Mother's Signature _____ **Date** _____
Father's Signature _____ **Date** _____
Student's Signature _____ **Date** _____

Registration Fee - \$12.00 Am't Pd. _____ Cash _____ Check # _____
 Tuition Deposit Am't Pd. _____ Cash _____ Check # _____ **Sept. Bal.** _____
 Mastercard Visa Credit Card Number _____ Exp. Date _____



Signature of Cardholder _____

A 3% administrative fee will be added to this credit card transaction.

Date Pd. _____ Rec'd by _____ On Comp. by _____

**** All tuition paid is non-refundable.**

A late fee of \$8 is applied to all accounts if tuition is not paid by the 7th of the month.

Fall Regform 2009-2010 Rochester Hills