

Mission of the Dance Institute: to foster talent by providing a comprehensive classical and contemporary training curriculum focused on the demands of a professional dance career.

YOUNG CHILDREN'S DIVISION REGISTRATION FORM 2008-2009

STUDENT INFORMATION

Last Name _____ First Name _____ Class _____
Address _____ City _____ Zip Code _____
Home Phone (_____) _____ Sex _____ Date of Birth _____ Age _____
Academic School _____ City/District _____ Grade _____

PARENT INFORMATION

Parents/Guardians Parent #1 _____ Parent #2 _____
Address (if different) Parent #1 _____ Parent #2 _____
Home phones Parent #1 _____ Parent #2 _____
Office phones Parent #1 _____ Parent #2 _____
Cell phones Parent #1 _____ Parent #2 _____
E-Mail Address Parent #1 _____ Parent #2 _____
Occupations Parent #1 _____ Parent #2 _____
Employer Parent #1 _____ Parent #2 _____

BILLING INFORMATION

Name _____
Address _____ City _____ Zip Code _____
Home Phone (_____) _____ Office Phone (_____) _____

EMERGENCY CONTACTS (to be called only in the event that we are unable to reach a parent)

Name _____ Phone (_____) _____
Name _____ Phone (_____) _____

Tuition Payment Contract

The Dance Institute is a non-profit organization that relies heavily on the tuition from its school to support the artistic objectives of the organization. The Dance Institute has created a unique learning environment for all of its students through the combination of classroom instruction and live performance. Non-compliance with the tuition payment schedule listed below will limit the student's ability to participate in classroom and performance activities.

	Registration Fee	Per Semester	Full Tuition	9 payments*	4 payments*	2 payments*	Circle Payment Option ←
08/09 Levels/Classes	Registration fee is waived if tuition is paid in full by 8/25/08	One Payment due 8/25/08	One Payment due 8/25/2008	Payment due monthly on the eighth day of each month starting 9/8/08, thru 5/8/09 (Tuition + \$25 divided by 9)	Payments due 9/8/08, 11/8/08, 1/27/09, 3/27/09 (Tuition + \$20 divided by 4)	Payments due 9/8/08, 1/27/09 (Tuition + \$15 divided by 2)	Indicate Level below with "X" ↓
Creative Mov. 3-5	\$25 +	\$207	\$413.00	\$48.67	\$108.25	\$214.00	
Creative Mov. 3	\$25 +	\$207	\$413.00	\$48.67	\$108.25	\$214.00	
Creative Mov. 4	\$25 +	\$207	\$413.00	\$48.67	\$108.25	\$214.00	
Creative Mov. 5	\$25 +	\$207	\$413.00	\$48.67	\$108.25	\$214.00	
Pre Ballet 6	\$25 +	\$207	\$413.00	\$48.67	\$108.25	\$214.00	
Pre Ballet 7	\$25 +	\$207	\$413.00	\$48.67	\$108.25	\$214.00	

Payments are due on the dates indicated above. Late payments and Non Sufficient Fund payments will be assessed a \$25.00 late fee. If you are unable to make a payment, you must contact the administrative offices and make alternative arrangements in writing.

*For families electing the 2 payment, 4 payment and 9 payment plans, an automatic deduction form (see below) must be completed. Tuition payments will be charged the first business day of the month listed above unless you specify an alternative date. The first tuition payment is required to hold placement.

If your account is greater than 30 days past due and alternative arrangements have not be made, participation in performances will not be allowed and enrollment may be terminated.

Tuition must be paid by check, debit or credit card, (a 3% convenience fee will be applied to all credit card transactions).

Refund Policy:

By signing this contract, you are agreeing to make tuition payments for the entire academic year. Refunds will only be considered if the student's position in the classroom is filled. The Dance Institute cannot ensure refunds.

Financial Aid:

To the extent that funds permit, MDT&DI offers financial aid to qualifying students in the form of reduced tuition. Applications for the 2008-2009 school will be due August 25, 2008. Financial aid, based on need, is determined using a sliding scale that considers family financial resources, number of dependents and degree of commitment. Aid is limited to Level 4 students and above and is granted for the full academic year. Re-application is required for each new academic year. Applications may be requested in person at the MDT&DI offices, by phone at (612) 338-0627, or via email at info@mndance.org.

Financial Assistance will be revoked if tuition payments are 30 days past due or attendance is not satisfactory.

I have read and agree to comply with the terms of the Tuition Payment Contract.

Print Name

Date

Signature

Direct Payment

We are pleased to offer you a new service—the Direct Payment Plan. Now you can have your payment made automatically from your checking or savings account. And, you won't have to change your present banking relationship to take advantage of this service.

The *Direct Payment Plan* will help you in several ways:

- It saves time – fewer checks to write.
- Helps meet your commitment in a convenient and timely manner – even if you're on vacation or out of town.
- No lost or misplaced statements, your payment is always on time—it helps maintain good credit.
- It saves postage.
- It's easy to sign up for, easy to cancel.
- No late charges.

Here's how the *Direct Payment Plan* works:

You authorize regularly scheduled payments to be made from your checking or savings account. Then, just sit back and relax. Your payments will be made automatically on the specified day. And proof of payment will appear on your statement. The authority you give to charge your account will remain in effect until you notify us in writing to terminate the authorization. If the amount of your payment changes, we will notify you at least 10 days before payment date. The Direct Payment Plan is dependable, flexible, convenient and easy. To take advantage of this service, complete the attached authorization form and return it to us.

AUTHORIZATION FOR DIRECT PAYMENT

I authorize and the financial institution named below to initiate entries to my checking/savings account. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution 3 days before my account is charged.

Staple Voided Check Here

(NAME OF FINANCIAL INSTITUTION)	(BRANCH)
(CITY)	(STATE)
(SIGNATURE)	(DATE)
(NAME — PLEASE PRINT)	
(ADDRESS — PLEASE PRINT)	
Account No. _____ Checking _____ or Savings _____	
Financial Institution Routing Number _____ <small>(between these symbols !: !: on the bottom left of your check)</small>	



RETAIN FOR YOUR RECORDS

On _____ I authorized
(DATE)

(COMPANY NAME & DEPT.)

(ADDRESS)

PHONE _____

to initiate electronic entries to my checking/savings account and have agreed to the terms listed on the authorization. I may revoke my authorization with the company at any time by writing to the address above.

Initial payment amount: \$ _____ (if payment amount changes we will notify you at least
Regular payment date _____ 10 days before the regularly scheduled payment date.)