

**Please complete the Registration Form below and return it to the School Office.
The Dance instructor will contact you regarding your child's lesson.**

Student Name: _____ **Dance Instructor:** Mrs. Lynne Dee Devens
Grade: _____ **Age:** _____ **Homeroom Teacher:** _____
Class Chosen: Ballet/Tap _____ Jazz _____ Combo _____
Parent Name: _____
Home Phone: _____ **Work Phone:** _____
Billing Address: _____
Previous Experience: Yes _____ No _____ **Number of Years** _____

METHOD OF PAYMENT: ALL lessons are PREPAID a SEMESTER at a time.

(adjustments for prepay will be made at the end of the semester)

Ballet/Tap/Jazz Class -\$210 Sem 1 -\$270 Sem 2

Both Classes \$189 Sem 1— \$243 Sem 2 (includes 10% discount)

Check No. _____ **Cash** _____ **Date** _____

FACTS (monthly automatic withdrawal) Complete form in the school office.

VISA/MC

Card Number: _____

Card Type: _____ **Expiration Date:** _____

Name as it appears on card: _____



St. Michael Lutheran School
3595 Broadway Ft. Myers, FL 33901
(239) 939-1218 www.smlcs.org