Mail with Paym		Registration Forn ance Center • 3611 La	ncaster Avenue • Philade	elphia, PA 19104			
Student's Name			Birth Date	Age	Sex		
Address		Home Phone (include area code)					
City	State		Zip				
Present School	N	lame & Address	Grade				
Parent/Guardian #1 Name	Home Phone	Work Phone	Cell Phone	E-Mail Address	<u> </u>		
Parent/Guardian #2 Name	Home Phone	Work Phone	Cell Phone	E-Mail Address	;		
Alternate Emergency Name	Home Phone	Work Phone	Cell Phone				
	This Applicat	ion Must be Signed	for Admission				
Please indicate how your child,  2 travel on their own  2 p	cked up by parent/guardian		another family				
I hereby release the Gwendolyn injury, illness or property damage hereby give permission for GBD promotional media including (bu Dancefusion and fusion2 to publis	occurring on or off the GBI C, Dancefusion and fusion t not limited to) newspape sh my information, including	OC premises, whether or roughter 2 to take and/or publish roughter, press releases, and to name, address, phone number 1000.	not caused by negligence of my photograph(s), and to p he GBDC public website. I	GBDC, its agents of ublish my name an also give permiss of phone directory.	or employees. d biography i ion for GBDC		
How did you find out about	the Gwendolyn Bye Da	nce Center?					
	THI	ERE ARE NO REFUN	NDS!				
Parent/Guardian Signature	Date	Signa	ture of person responsi	ble for tuition if d	ifferent		
Name/s of anyone picking u	p your child other than		es and Tuition	<b>→</b>			

My Child			wishes to register for the	following	class/classes.
Day		lass	•	•	Time
		-			
	Tuition Pay	ment	& Performance Fees	<b>3</b>	
Total Number of dance classes	taken per week	_		Fee:	\$
Children's Theater				Fee:	\$
Deduct any discounts if applical	ble			Minus:	- \$
Yearly Registration Single \$35		Fee:	\$ <u>35.00 or \$45.00</u>		
Total Amount					\$
Performance Fees:					
Theater Fee				Fee:	\$
Recital Fee				Fee:	\$
Recital Outfits: (Each dance cl	lass has a different recital outfi	t. Charges	for additional recital outfits will be	billed sepa	rately).
·				Fee:	\$
	THEI	RE ARE	NO REFUNDS!		
		Office	Use Only		
Full Year Tuition:	\$ Da	ate:			
Yearly Registration Fee:	\$ Da	ate:			
	Payment 1:	\$	Date:		Late Fee
	Payment 2:	\$	Date:		Late Fee
	Payment 3:				Late Fee
	Payment 4:		 Date:		Late Fee
	Payment 5:	\$	Date:		Late Fee
	Payment 6:	\$	Date:		Late Fee
	Payment 7:	\$	Date:		Late Fee
Balance Due		\$			
		T	<del></del>		