

Use this form to SWITCH from one class or another; or to ADD a class in person. Do not use to withdraw from class(es).



SUPPLEMENTAL REGISTRATION

STUDENT'S NAME: _____

Please make the following changes to my child's registration. I understand that I will be billed at a prorated rate based on the date of the change and if additional classes are added.

As of _____ (date) please ADD the following classes			
	Class Name	Date/Time	Location
1.			
2.			
3.			
4.			
And (if applicable) REMOVE the following classes			
1.			
2.			
3.			
4.			

I understand that I am responsible for any increase in tuition resulting from this supplemental registration.

Dated: _____

Personal responsible for payment

Training the Complete Dancer™

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