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## Midlothian Studio:

2441 Colony Crossing Place Midlothian, Virginia 23112 (804) 272-9152 danceatlegacy@gmail.com

STUDENT INFORMATION:	
Student's Name	Date of BirthCurrent Age
Parents' Name:	
Address	City,StateZip
Phone (1)(2)	(3)
Email Address(es):	
<ul> <li>placement. Installments 2 - 9 are due on the will be applied if payment is not received by</li> <li>A \$35.00 fee will be charged for all rejected payments. All payments must be paid by cash, che Discover) to ensure proper posting to account account to pancers will be required to purchase costum tuition fees.</li> <li>Only students whose accounts are paid up to in the Showcase.</li> <li>Tuition paid in full at registration with cash of the We offer a 5% discount for additional sibling.</li> <li>There are no refunds given for dancers that of the simple side of the side of</li></ul>	ent are due at the time of registration to maintain class first of each month from October through May. A late fee of \$25 the 7th of each month. payments including returned checks and declined charge neck, money order, or charge card (Visa, Mastercard, or ints. hes for their performances. Costume fees are separate from to date will receive their costumes and be allowed to perform or check will receive a 5% discount. Is who enroll in classes. It discontinue taking classes during a session. Showcase and a complimentary DVD to each family whose
<b>Medical Information:</b> Does the student have any illness, allergies, or injur	ies of which the studio should be aware? Y N
	nt/guardian) of(student) r representative thereof, to seek medical attention if

Fall 2023 Season Classes Begin Monday, September 11th 9 Installments due Monthly (Sept-May)		Class Schedule				
		Class	Day	Time		
45 minutes a v	week: \$72 a month					
60 minutes:	\$ 82.00					
90 minutes:	\$ 144.00					
2 Hours:	\$ 160.00					
2 ½ Hours:	\$ 184.00					
3 Hours:	\$ 194.00			<del></del>		
3 ½ Hours:	\$ 210.00					
4 Hours:	\$ 220.00					
4 ½ Hours:	\$ 230.00					
5 Hours:	\$ 240.00					
5 ½ Hours:	\$ 250.00					
6 Hours +:	\$ 270.00					
		TOTAL HOURS: _	INSTALLMEN	IT AMOUNT		
I thoroughly read and understand the Tuition Policy, Medical Information, and Agreement Terms. I understand Legacy School of Dance, LLC assumes no responsibility for personal injury. I grant permission for any of my child's photographs/videos to be used in promotional literature or for promotional purposes.						
Parent						
Signature:		Date:				