

Dance with Spirit's 2025 Registration Form

28 Draper Lane Canton, MA
508-524-9770
Dancewspiritcanton@gmail.com



Student's Name _____

Date of Birth ___/___/___ Age _____ Entering Grade _____

Parent's Name _____ Parent's Name _____

Address/P.O. Box _____ City/State/Zip _____

Parent Cell # _____ Student Cell # _____

E-Mail Address _____

Additional Health/Mental Information _____

PLEASE WRITE IN CLASSES THAT YOU ARE INTERESTED IN :

Class day and Time _____ Class day and Time _____

Class day and Time _____ Class day and Time _____

Class day and Time _____ Class day and Time _____

Class day and Time _____ Class day and Time _____

Total Tuition Rate _____

*Tuition maximum is \$310 **per student** this excludes Solo & Duets
DUE BY THE FIRST OF EACH MONTH.*

30 minute Solo session \$45 _____ 30 minute Duet session \$35 _____

Select one: Biweekly or Weekly

Other discounts may apply see director, Amy Kellicker

Master Cards and Visa are accepted if you would like to use this service please fill out the following:

Card type _____ **Card #** _____

Expiration date _____

By signing below you acknowledge that Dance with Spirit is NOT responsible for anything lost, stolen, any injuries or any illness. You also are agreeing to pay the monthly tuition written above. If tuition goes unpaid for two or more months Dance with Spirit reserves the right to dismiss a student until tuition is paid.

Parent Signature _____

\$45.00 registration fee, All Payments made out to Amy Kellicker