

Terpsicorps Theatre of Dance Asheville Summer Intensive 2009

Tuition Form

Parent/Guardian Name: _____

Billing Address: _____

Parents Email Address: _____

- 1st week, June 15th-19th : non refundable \$500
- 2nd week, June 22nd-26th : non refundable \$500

Payment Methods (Please check one)

- check made payable to Center Stage Dance Studio
- please charge my credit card:

Name on card: _____

Name on card: _____

Card Number : _____

Expiration Date: _____ VDC: _____

Master Card, Visa and American Express accepted

Amount to be billed: _____

Signature: _____

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