SPARK OF CREATION STUDIO
Dance - Music - Theater

# CLASS ADD FORM

☐ FALL ☐ WINTER ☐ SPRING ☐ SUMMER _____ YEAR

STUDENT NAME: _____
LAST FIRST M.I

ACCOUNT NAME: _____
LAST FIRST

CLASS ADD DATE: _____

CLASS: _____ DAY/TIME: _____

CLASS: _____ DAY/TIME: _____

CLASS: _____ DAY/TIME: _____

**I UNDERSTAND THAT I AM RESPONSIBLE FOR ALL ADDITIONAL CLASS TUITION.**

_____ _____
STUDENT/PARENT SIGNATURE DATE

*Office use only:*

DATE RECIEVED: _____ STAFF INITIALS: _____

AUTO-PAY METHOD: EFT / CREDIT CARD / NONE

TUITION ADJ DATE: _____ TUITION ADJ AMOUNT: $ _____

NOTES:
_____
_____
_____

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