24/25 class order form

spring

semester

fall

summer

contact information

student name		student date of birth			
t-shirt size (XS-XXL) specify y	outh or adult **				
parent/guardian name					
billing address					
city		state	zip code		
contact phone (mandatory)	contact email (mandatory)	secor	ndary email (recommended)		
**t-shirt size only applicable for su	mmer camp registrants				
method of payme	nt				
Will you be paying monthly tuition or full tuition? monthly* full					
check**	credit card	call me for credit card informat	ion		
type of card: visa	mastercard discover	american express			
name that appears on credit of	card				
credit card number			expiration date		
CVC (3-digit number on back of ca	rd)		billing zip code		

*If paying monthly, please complete a Monthly Payment Plan Agreement. Monthly payments are automatic and will be charged on the first business day of each month. Cash is not accepted.

** Make payable to Dr. Phillips Center for the Performing Arts. Not valid for monthly payment plans.

Dr. Phillips Center for the Performing Arts Attn: School of the Arts 155 East Anderson Street Orlando, FL 32801

407.455.5551 classes@drphillipscenter.org drphillipscenter.org/classes



AdventHealth School of the Arts

24/25 class order form

class name	course #	semester or monthly tuition

total cost:

please sign

I have read the 24/25 policies and procedures and agree to attend the class(es) noted above.

- 1. I understand I will not be refunded this tuition payment unless my class is cancelled.
- 2. I understand I am making a commitment to attend all or most classes.
- 3. I am above 18 years old or my parent/guardian consents to my order.
- 4. I will read the student handbook, adhere to those rules and complete all additional paperwork on or before my first class.
- 5. The information in this application is correct to the best of my knowledge.
- 6. I understand all sales are final.

student name (or parent/guardian, if minor) please print

student signature (or parent/guardian, if minor)

date

application checklist

complete & sign order form

include method of payment