

Dancers Domain 2020-2021 Summer Class Registration Form

ACCOUNT INFORMATION:

INPUT DATE: _____ INITIALS _____

(PLEASE CHECK THE BOX THAT APPLIES)

I'M CURRENTLY REGISTERING FOR **IN PERSON** CLASSES
 I'M CURRENTLY REGISTERING FOR **ZOOM** CLASSES

PARENT 1: _____ PARENT 2: _____

ADDRESS: _____ CITY _____ STATE _____ ZIP _____

HOME #: _____ PARENT 1 CELL: _____ PARENT 2 CELL: _____

PARENT 1 EMAIL: _____ PARENT 2 EMAIL: _____

(***PLEASE NOTE WE WILL BE COMMUNICATING PRIMARILY THROUGH EMAIL DURING THE PANDEMIC***)

EMERGENCY CONTACT NAME: _____ PHONE: _____

HOW DID YOU HEAR ABOUT DANCERS DOMAIN: _____

STUDENT INFORMATION:

STUDENT 1 NAME: _____ BIRTHDAY ___/___/___ MALE/FEMALE

STUDENT 2 NAME: _____ BIRTHDAY ___/___/___ MALE/FEMALE

STUDENT 3 NAME: _____ BIRTHDAY ___/___/___ MALE/FEMALE

CLASS INFORMATION:

<u>STUDENT</u>	<u>CLASS</u>	<u>DAY</u>	<u>TIME</u>	<u>TEACHER</u>

Dancers Domain 2020-2021 Summer Class Financial & Policy Agreements

TUITION POLICY:

AT DANCERS DOMAIN WE HAVE TWO PAYMENT OPTIONS AVAILABLE, PLEASE SELECT FROM THE OPTIONS BELOW:

_____ **OPTION 1 FULL YEAR DISCOUNTS: RECEIVE 5% OFF YOUR TUITION IF FULL AMOUNT IS PAID IN ADVANCE**

_____ **OPTION 2 AUTOMATIC CHARGE: YOUR TUITION WILL BE SPLIT INTO TEN MONTHLY INSTALLMENTS THAT WILL AUTOMATICALLY BE DEDUCTED ON THE 1ST OF EACH MONTH. IF YOUR CARD IS DECLINED YOU WILL RECEIVE A PHONE CALL OR EMAIL NO LATER THEN THE 5TH OF THAT MONTH.**

CREDIT CARD AUTHORIZATION:

I AUTHORIZE DANCERS DOMAIN TO DEBIT MY CARD ON THE FIRST OF EACH MONTH FOR MONTHLY TUITION. I UNDERSTAND MY CREDIT CARD INFORMATION WILL BE HELD STRICTLY CONFIDENTIAL AND DEBITED ON THE AMOUNT OF AGREED MONTHLY FEES. I REALIZE THAT IF FOR ANY REASON MY SON/DAUGHTER DECIDES TO WITHDRAW FROM THE PROGRAM, I AM RESPONSIBLE FOR THIS AMOUNT UNLESS I SEND A WRITTEN LETTER OF WITHDRAWAL PRIOR TO THE FOLLOWING MONTH.

CREDIT CARD (PLEASE CIRCLE ONE)- CARD ON FILE VISA MASTERCARD DISCOVER AMERICAN EXPRESS

CARD NUMBER: _____ EXP. DATE _____

NAME ON CARD _____ CCV: _____

ZIP CODE OF BILLING ADDRESS _____

SIGNATURE _____ DATE _____

STUDIO POLICIES & MASK PREFERENCE: (PLEASE INITIAL)

_____ **PARTICIPATION: STUDENTS WILL NOT BE ALLOWED TO PARTICIPATE IN CLASS OR RECITAL IF THEIR IS OUTSTANDING BALANCE ON THE ACCOUNT**

_____ **PHOTOGRAPHY & VIDEO: I AUTHORIZE DANCERS DOMAIN TO TAKE PHOTOGRAPHS AND VIDEOS FOR USE IN BROCHURES, WEBSITES, ADVERTISEMENTS, AND OTHER PROMOTIONAL MATERIAL.**

_____ **MEDICATION: FROM TIME TO TIME STUDENTS APPROACH US FOR MEDICATIONS FOR MINOR AILMENTS AND HEADACHES.**

_____ **LIABILITY: I HEARBY RELEASE DANCERS DOMAIN AND ALL STAFF MEMBERS FROM ALL CLAIMS OF DAMAGES OR INJURY SUFFERED BY THE ABOVE REGISTERED STUDENTS.**

_____ **INITIAL HERE THAT YOU ACKNOWLEDGE EVERYONE IS REQUIRED TO WEAR A MASK IN THE STUDIO AT THIS TIME**

I HAVE READ AND UNDERSTAND THE STUDIO POLICIES AND I AGREE TO ABIDE FULLY BY ITS TERMS

PARENT OR GUARDIAN SIGNATURE _____ DATE _____

Dancers Domain 2020-2021 Summer Class Tuition Breakdown

Tuition is based on the total number of classes taken per student. Families with multiple students will receive a 5% discount on additional siblings. This only applies to immediate family members living in the same household.

NUMBER OF CLASSES	SUMMER TUITION 6 WEEK CLASS SESSION
1 CLASS	\$105
2 CLASSES	\$180
3 CLASSES	\$240
4 CLASSES	\$285
5 CLASSES	\$330
6 CLASSES	\$375
7 CLASSES	\$420
8 CLASSES	\$450
DROP IN RATE	\$25
SUMMER REGISTRATION	\$10

(PLEASE INITIAL AND SIGN BELOW)

_____ I UNDERSTAND THERE IS \$10 SUMMER REGISTRATION FEE

I AGREE TO PAY \$ _____ FOR THE SIX WEEK SUMMER SESSION

_____ I UNDERSTAND THAT IF I ADD ANY CLASSES MY TUITION WILL GO UP.

SIGNATURE: _____ DATE: _____

DANCERS DOMAIN 13610 N. SCOTTSDALE RD STE 20, SCOTTSDALE AZ 85254
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DANCERDOMAINAZ@GMAIL.COM