

The Dance Spot

2018-2019

Registration Form

**One Form Per Family

For Office Use Only:

Tuition: _____

Month C/C Fee: _____ # of Months _____

Registration Fee(s): _____

☐ Paid/Waived Audition Fee

Family Last Name: _____

Mother's Name (First): _____ (Last): _____

Home #: _____ Cell #: _____

Mother's E-mail: _____

Father's Name (First): _____ (Last): _____

Home #: _____ Cell #: _____

Father's E-mail: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Emergency Contact Name: _____ Phone: _____

Student #1 Name: _____ Date of Birth: _____

Cell Phone: _____

Student #2 Name: _____ Date of Birth: _____

Cell Phone: _____

Terms and Conditions:

-I hereby register my child for dance classes at The Dance Spot. I agree to have my debit/credit card run on the first Thursday of the month for tuition. If I choose to pay by check or cash, I understand there will be an extra charge of \$15.00 per month.

-I agree to have my debit/credit card run on the third Thursday of the month to pay the monthly costume/competition fee total assigned to my child's team. If I choose to pay by check or cash, I understand there will be an extra charge of \$15.00 per month.

-I agree to pay a student registration fee of \$30.00 for the first child and \$15.00 for the second child. This payment will be paid in full before the first class is taken.

-I agree to pay the returned check fee charge of \$20.00 for any check returned from the bank.

-I understand that in order to drop a class, I must fill out a drop form and turn it into the office giving 1 month of notice, or I will be charged for the entire month of tuition.

-I allow a media release, for my dancers photos to be placed in media for advertising and other purposes.

-In case suit or action is instituted to collect tuition or any other fees due to The Dance Spot, the below named promises to pay all collection costs and such additional sums as the court may adjudge reasonable such as court costs, attorney fees, service of process, etc. in said suit or action.

RELEASE: I hereby release The Dance Spot and all staff and officials from all claims of damages or injury suffered by the above registered student in connection with or by their association with The Dance Spot. This includes my heirs who may not act in my behalf.

-I have read and understand the terms of the above contract and agree to abide fully by its terms.

PARENT'S SIGNATURE: _____ DATE: _____