



Dancers Only Studio

Student Policy Release & Registration Form

Student #1 Name _____ Birthdate _____ SRD # _____ (office use only)
 Student #2 Name _____ Birthdate _____ SRD # _____ (office use only)
 Student #3 Name _____ Birthdate _____ SRD # _____ (office use only)
 Address _____ City _____ Zip _____

Phone: Home _____ Cell #1 _____ Cell #2 _____

E-mail address (please print clearly) _____

At *Dancers Only Studio* for (_____ yrs. Student #1) (_____ yrs. Student #2) (_____ yrs. Student #3)

List any allergies or pre existing health issues that studio should be aware of:

Emergency contact person _____ **Phone** _____

How did you hear about *Dancers Only Studio*

Friend (Name) _____ Local Advertising _____ Other _____

Prior years of dance training _____ Name of previous studio _____ Y/N Interested in Competition _____

Classes Registering For:

1 st Class-Student # _____	Day _____	Time _____	Description _____
2 nd Class-Student # _____	Day _____	Time _____	Description _____
3 rd Class-Student # _____	Day _____	Time _____	Description _____
4 th Class-Student # _____	Day _____	Time _____	Description _____
5 th Class-Student # _____	Day _____	Time _____	Description _____
6 th Class-Student # _____	Day _____	Time _____	Description _____
7 th Class-Student # _____	Day _____	Time _____	Description _____
8 th Class-Student # _____	Day _____	Time _____	Description _____

Tuition is due by the first day of every month. If an account is not paid by the 8th day of the month, a \$10 late fee will automatically be charged. If an account is not paid by the 30th day of the month, the student's dance classes will be suspended until account is paid in full. There will be no refunds or credits given for classes not attended. A \$35.00 fee will be charged for all returned checks. No refunds or costumes will be given to students who have discontinued their classes prior to the recital once costumes are ordered. Costumes and recital tickets will not be released if student's tuition balance is not paid in full. In consideration of *Dancers Only Studio* allowing the above named student to participate in its dance/fitness programs, I do hereby forever release and hold harmless *Dancers Only Studio*, its owner, employees, volunteers, teachers and staff from any and all claims of every kind or nature arising out of the student's participation in dance/fitness instruction or activity associated with *Dancers Only Studio*. I certify that my child is in good health and able to participate safely in any activity in which I have registered them to participate in at *Dancers Only Studio*. Signing this agreement acknowledges that I have read, fully understand, and agree to all of the above information and as parent, legal guardian and/or representative for the above student hereby assume all risk regarding this activity. I also agree to bring my child to class on time and in accordance with Policies & Procedures of *Dancers Only Studio*. I agree to allow myself/my child to be photographed and/or video taped at the studio, competitions, dance events or the annual dance recital and do hereby release permission for the photographs/tapes to be sold to parents and/or students of *Dancers Only Studio* or used on *Dancers Only Studio's* official website or face book page.

Parent/Guardian Signature _____ Date _____

Please print name also _____

Office Use Only Below Line

\$10 Registration fee per dancer \$ _____ + Monthly Tuition \$ _____ = Total Amount Due \$ _____

Amount Paid \$ _____ Cash or Check # _____ Date Paid _____ Rec'd by _____ Balance Due \$ _____