



Kids Dance

2011/2012 Dance Season

Registration Form

Today's Date ____/____/____

Student's First Name _____

Student's Last Name _____

Students Birth date ____/____/____

Current Age _____

Grade in School _____

Address _____

City _____ Zip _____

Home Phone _____ Cell _____

Mother's First & Last Name _____

Father's First & Last Name _____

E-Mail Address _____

Emergency Contact Full Name & Phone Number: _____

Are there any health issues or medical conditions the studio and instructor should be aware of? If yes please describe.

How did you hear about the studio? A Friend Ad
 Phone Book Drive By Internet Other

CLASS REQUESTS: (Please give a 1st AND 2nd choice)

Type of Class(es)	Day/Time
_____	_____
_____	_____




I hereby authorize Kids Dance to initiate electronic payments for tuition and or any balances due on my account if payment is not received by the 10th day of each month that tuition is applied. E-mail notification will be sent any time a payment is processed. If for whatever reason, payments cannot be processed with the payment information below and my account balance remains overdue by the end of any calendar month, I understand that my child's enrollment in classes will be cancelled.

Card Holders Name: _____

Credit /Debit Card Number :
 _____ - _____ - _____

Signature: _____

Exp Date: ____/____/____

- Please **INCLUDE** the annual \$20 Registration Fee with this form and first months tuition to hold your placement in the class(es).
- Tuition is due by the 10th and will be considered late after that
- Payment's may be left in the tuition box , paid online or mailed to the studio address.

Kids Dance
140 South Wilcox St. Unit A
Castle Rock, CO 80104

- Make-ups for missed classes and cancellations due to weather or illness can be taken with any class of your choice in the same age range. Call to schedule make-ups. There will be no makeup's allowed in full classes. Due to the recital choreography there will be no make up classes after February. (MAXIMUM of 4 per year allowed)
- Monthly tuition rates remain the same each month, as we average 4 classes per month over the dance year.
- I understand that I must give a 2 week notice prior to withdrawing from class to avoid accumulating tuition charges.

PHOTO WAIVER
 I hereby permit Kids Dance, LLC to use pictures/videos taken in class or at performances, in which myself/ or my child may appear, for purposes of communications and literature about the studio.

POLICY AGREEMENT
 I understand that Kids Dance does not give credit and/or refunds for tuition (due to holiday, vacation and weather) registration fees, costume fees or private lessons. I further understand that there are specific risks of physical or property damages, losses, or injury that may result from my child's participation with Kids Dance, and I voluntarily assume the risks associated with such participation. I will not hold Kids dance or any of their staff liable for any injuries or loss of property that may occur.

RELEASE AND LIABILITY WAIVER—Required

I, _____
 (Printed First and Last Name)

I HAVE READ AND UNDERSTAND ALL OF THE ABOVE INFORMATION, AND AM WILLING TO COMPLY WITH THE POLICIES SET FORTH BY KIDS DANCE LLC ,ITS OWNER, DIRECTOR, AND EMPLOYEES.

SIGN HERE _____

Office Use Only:

_____ confirmation form given on _____