

2019-2020 FALL-SPRING CLASS FEES

Fall Class Fees/Payment Info. Please fill in all information below.

STUDENT NAME:

First month's tuition: \$ _____

May tuition: \$ _____

Registration fee: \$ _____
\$30/Child or \$40/Family

Total \$ _____



PAYMENT OPTION #1:

Monthly Auto-Debit or Auto-Charge

Pay your initial registration (1st and last month plus registration fee) by cash, check, VISA or MasterCard. Starting October 1st, your tuition will be debited from your bank account (or charged to your credit card) on the first day of each month (October-April).

PLEASE FILL OUT FORM BELOW FOR THIS OPTION

PAYMENT OPTION #2:

Annual Payment

Annual payment by cash, check, VISA or MasterCard.

Deduct 5% from your entire registration (full year of tuition, plus registration fee).

PLEASE FILL OUT FORM BELOW FOR THIS OPTION

Method of Payment Monthly AutoPay

Checking Account - attach voided check

Credit Card - fill out below

Exp.Date: _____

Credit Card # _____

I hereby authorize DEI to charge my account the

tuition amount of \$ _____ on the first day of each month beginning _____ and ending _____.

All charges will appear as Dance Evolutions. I will give the studio office one month's written notice from the 1st of the month to discontinue these charges.

Signature

Date

Method of Payment for Costumes

Checking Account - attach voided check

Credit Card - fill out below Exp. Date: _____

Credit Card # _____

I hereby authorize DEI to charge my account the

costume fee amount of \$ _____ # of costumes _____ on _____.

This charge will appear as Dance Evolutions

Signature

Date

PLEASE NOTE: There will be a 3% convenience fee on all credit or debit card payments to cover the fees charged by processing companies. There are no convenience fees associated with payment by paper check.

PARENTAL RELEASE

I have read & agree to abide by ALL DEI policies, paying special attention to tuition, late fees, costumes, attendance & attire policies.

I understand that DEI reserves the right to refuse instruction to anyone not abiding by DEI policies.

I understand that DEI reserves the right to cancel a class if enrollment falls below five students per class.

I understand that DEI is not responsible for lost items, stolen items, or unclaimed merchandise.

I have read & agree to the DEI DANCE & TUMBLING LIABILITY RELEASE

I authorize DEI to secure any emergency medical treatment my child might need at the nearest medical facility.

Please list any medical concerns of which we should be made aware: _____

I allow DEI to use my child's first name and/or photograph in all forms and media for advertising, trade or any other lawful purpose.

Yes No

Parent/Guardian Signature _____

Date: _____

FALL 2019-2020 CLASS REGISTRATION

FALL CLASS REGISTRATION INFO. Please fill in all information below. Use only one form per student.

Personal Information:

Parent/Guardian Name Cell Phone # Phone #2

Address City Zip

_jmsteinhoff4@gmail.com _____

Email (Required to receive studio newsletter and ALL IMPORTANT UPDATES) Emergency Contact Name Phone #

Student Information:

Student Name Birthdate Academic School Grade

KIDZ ACADEMY-DANCE & TUMBLING CLASSES (18 MONTHS-6 YEARS OLD)

- PARENT/TOT: DANCE or TUMBLING (AGE 18 MO TO 3).....45 MINUTES=\$50.00/MO.
 CREATIVE MOVEMENT or TOT TUMBLING (AGE 2-4 & NO parents).....45 MINUTES=\$50.00/MO
 PRE-PRIMARY: BALLET or TUMBLING (AGE 4-5 & NO parents).....45 MINUTES=\$50.00/MO
 PRIMARY COMBO CLASS or TUMBLING (only) (AGE 4-6 & NO parents).....60 MINUTES=\$55.00/MO.
 BALLET/TAP or BALLET/JAZZ or BALLET/HIP HOP or BALLET/TUMBLING or HIP HOP/TUMBLING
- **NEW**** BALLET/TAP/JAZZ COMBO (30 MIN PER STYLE)(1 NIGHT/WK) (AGE 5-6).....90 MINUTES=\$65.00/MO.
- **NEW**** COMBO CLASS BUNDLE (AGE 5-6).....1.75 HOURS/WK-(2 NIGHTS/WK)=\$95
 JAZZ/TAP (1.0 HR) & BALLET (.75 HR) or HIP HOP/TUMBLING (1.0 HR) & BALLET (.75 HR)

CLASSES FOR AGES 7 AND OLDER

- BALLET POINTE TAP LYRICAL/CONTEMPORARY HIP-HOP TECHNIQUE/TURNS/FLEXIBILITY
 VARIETY JAZZ(MUSICAL THEATRE & BALLROOM) ADULT (BALLET/TAP/JAZZ) TUMBLING/ACRO FOR DANCE
- BEG/INT/ADV (AGE 7+)1.0 HOUR=\$55.00
 BEG/INT/ADV (AGE 7+).....1.25 HOUR=\$60.00
 INT/ADV (TEACHER APPROVAL).....1.50 HOUR=\$65.00

First Choice of Classes:				Second Choice of Classes:			
Day	Class	Time	Teacher	Day	Class	Time	Teacher
Day	Class	Time	Teacher	Day	Class	Time	Teacher
Day	Class	Time	Teacher	Day	Class	Time	Teacher
Day	Class	Time	Teacher	Day	Class	Time	Teacher
Day	Class	Time	Teacher	Day	Class	Time	Teacher

DEI DANCE, TUMBLING & CHEER LIABILITY, PAYMENT & MEDIA RELEASE

I, being 21 years of age or older, do for myself (or on behalf of the minor Child being named on this registration form) hereby release, forever discharge and agree to hold harmless Dance Evolutions, Inc., (hereafter DEI) and its employees, volunteers, directors, agents and owners from any and all liability, claims or demands for any accident, personal injury, sickness or death, as well as property damages and expenses, of any nature whatsoever which may be incurred by the undersigned and/or the child participant that occur while said is participating in any activity associated with DEI, whether in the studio, at any other location, or while traveling to and from another location. Furthermore, I (and for or on behalf of my child participant, if under the age of 21 years) hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in dance and/or tumbling activities involved therein.

I specifically acknowledge that dancing is a sport and recreational activity with inherent risk, and that the Recreation Safety Act is applicable to the activities occurring during participation. I acknowledge that outside of class that participants or observers are not supervised by studio personnel and should be supervised by parents or guardians.

Further, authorization and permission is given to DEI to furnish and hereby release liability of transportation, food and lodging for this participant. The undersigned further hereby agrees to hold harmless and indemnify DEI its employees, volunteers, directors, agents and owners, for any liability sustained as the result of negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto.

This accident waiver and general release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I understand and agree to the terms set forth in this Liability Waiver. I have read the foregoing, the "Studio/Class Etiquette", "Class Attire", & the "Studio Policy", and I understand and agree to the contents thereof.

(If the participant has not attained the age of 21 years): I (we) are the parent(s) or legal guardian(s) of this participant, and hereby grant our (my) permission for him/her to participate and hereby give our permission to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not limited to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any. Further, should it become necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, I (we) hereby assume all transportation costs.

PRINT NAME OF PARTICIPANT: _____

PRINT NAME OF PARENT/GUARDIAN _____

Parent / Guardian Signature: _____ Date ____/____/____

TUITION POLICY

You have registered your child/self for the full season-September 2019 through May-2020. Tuition rates are also for the same full Season. Your Payment for the DEI non-refundable Annual Membership Fee & the September 2019 tuition is due upon registration. There is a two-month minimum for all lessons and May 2020 tuition is due by September 30, 2019. We charge full tuition every month no matter the number of classes. NO monthly tuition refunds/credits/deductions are made for classes missed or dropped during the month. 30-day written notice from the first of the month is required to discontinue lessons or you will be charged for continuing class placement the next month and until you cancel classes with 30 days written notice. Parent must 1. Notify DEI in person & 2. Complete & sign a withdrawal form. All automatic bank debiting or credit card charges will stop after payment for the full one-month notice period.

Parent/Guardian Signature: _____ Date ____/____/____

MEDIA RELEASE

I understand that the activities with DEI, I or my child participant, may be photographed or videotaped. I agree to allow any photo, video or film likeness to be used for any legitimate business purpose to DEI.

Parent/Guardian Signature: _____ Date ____/____/____