

Academy of Dance Arts
2009-2010
STUDENT REGISTRATION FORM

Date _____

STUDENT INFORMATION

Name _____ Date of Birth _____

Address _____ Zip _____

Academic School _____ Grade _____

PARENT CONTACT INFORMATION

Mother's Name _____ Father's Name _____

Home Phone _____ Cell Parent _____

Work Phone _____ Cell Student _____

EMAIL ADDRESSES

Studio memos are sent by email. Please print your email addresses clearly

#1 _____

#2 _____

EMERGENCY INFORMATION

Person to Contact in Case of Emergency (If Parent Cannot Be Located)

Name _____ Relationship _____

Phone _____ Cell _____

Any Medical Conditions We Should Know About?

Name _____

List the classes you are registering for		
CLASS	DAY/TIME	INSTRUCTOR

Agreement and Release

TUITION PAYMENT POLICY AGREEMENT

Initial next to each policy indicating that you understand and agree with the policies for tuition payment.

___ 1. Tuition is at the discounted rate **ONLY** if paid by the last day of the previous month.

___ 2. Tuition received between the 1st & 5th is at the higher regular rate.

___ 3. Tuition received after the 5th is at the higher regular rate and is subject to a \$15 late fee.

___ 4. There are no refunds, credits, or transfer of tuition.

I, THE UNDERSIGNED, REALIZE THAT PARTICIPATION IN A DANCE PROGRAM CAN OCCASIONALLY RESULT IN AN INJURY. I HEREBY RELEASE THE Academy of Dance Arts, the Rancho Peñasquitos Towne Centre, and/or their owners, and/or their agents from any claims, of any kind, or nature arising out of damage to property or personal injury occasioned by or in connection with any portion of my or my child's participation in any program I or my child take part in.

Signature of Parent _____

Date _____

Payment Accompanying Initial Registration

Number of Classes _____

___ \$25 ___ Registration Fee

___ Competition Fee

___ Pro-rated Amount For _____

___ Monthly Tuition For _____

___ **Total / Check #** ___ **Cash** _____

For Office Use
___ Student Photo
___ Dance Works
___ Competition
___ Student ID
___ Privates