

Welcome!**Family Information...**

Student's Name (Last, First) _____		Date of Birth _____ / _____ M F		AGE _____	Sex _____
Parent/Guardian (MOTHER) _____		Parent/Guardian (FATHER) _____			
() _____	() _____	() _____	() _____		
Cell Phone	Work Phone	Cell Phone	Work Phone		
Address _____		School _____		Grade _____	
City, ST, ZIP Code _____		To whom shall we thank for this referral? (Former student, friend, ad, etc.) _____			

Sibling/s _____

E-Mail Address: _____

Prior Dance Experience...**Are you interested in joining a competition group? ____ yes / ____ No**

Former Dance School & Years of Study _____

Teachers/Mentor _____

Ballet _____

Tap _____

Jazz _____

Other _____

Student's Measurements (For costumes, dance attire & warm-ups...)

Bust/Chest _____	Height _____	Shoe Size _____
Waist _____	Inseam _____	Pant Size _____
Hips _____	Leotard Size _____	Weight _____
Girth _____	Dress Size _____	Date Measured: _____

Desired Classes...

Class

Day/Time

Class

Day/Time

1)

5)

2)

6)

3)

7)

4)

8)

Tuition Payment Schedule*****FOR OFFICE USE ONLY!*******Today's Date ____ / ____ / ____**

Of CLASSES _____ @ \$ _____ LESS _____ % = \$ _____ /monthly tuition # _____ @ \$ _____ LESS _____ % = \$ _____ /mo

 Sibling (_____) @ \$ _____ = _____ # _____ @ \$ _____ LESS _____ % = \$ _____ /mo
 (Sibling Amount)

Tuition Amount (Sub Total) _____

\$25 Registration Fee: _____**Grand Total:** _____ (Due Today)**Monthly Tuition:** _____ (Next Payment due on the 1st)

Ask about our Trade & Barter Program. Bartering is the process of trading products, goods or services, for other products, goods or services. It is a simple method of transaction, frequently one in which no money is exchanged. If you are interested, please include your name and type of service you are offering.

Name: _____ **Phone:** _____**Area of Expertise:** _____

Medical Information *(In the event the parent cannot be reached, please contact...)*

Emergency Contact (Relationship) _____ () _____ ()
 Cell # _____ Work # _____

Physician's Name _____ Phone Number _____

Allergies _____ Medications _____

Special Health Considerations _____

By submitting this registration, I voluntarily submit myself or my child(ren) for attendance and participation in the classes/activities offered by Legacy Dance Studio LLC ("LDS") and hereby agree to the followings terms and conditions:

Tuition Policy:

Tuition is due by the 1st day of each month by cash, check, or charge. _____ (initial)

All Charge Payments are subject to a **\$3 convenience fee/service charge per transaction.** _____ (initial)

Tuition payments made after the 7th day of the month will be assessed a \$10 late fee without exception. _____ (initial)

Post-dated checks are not an acceptable form of payment. _____ (initial)

Returned checks will be assessed a **\$35 returned check fee.** _____ (initial)

Checks should be made payable to Legacy Dance Studio LLC. _____ (initial)

Tuition is due from the 1st day of September through the last day June. _____ (initial)

Monthly and Annual Tuition, once paid, is non-refundable and non-transferrable. _____ (initial)

Tuition must be current to attend class, participate in any performances, and receive recital tickets or costumes. _____ (initial)

Students with tuition balances past-due 1 month will not be allowed to take class until tuition and fees are current. _____ (initial)

Registration:

In addition to the first month's tuition, a non-refundable **annual fee of \$25 per family is required at registration.** _____ (initial)

Registration Fee does not cover admission to recital nor any parent tickets for the recital _____ (initial)

Withdrawal:

A student may withdraw for any reason, but because of fixed overhead expenses, one month advance written notice must be given. _____ (initial)

Written notice must be dated and delivered to the Owner or the receptionist on duty. _____ (initial)

Withdrawing students are responsible for tuition during the one-month withdrawal period. _____ (initial)

Adding a Class:

Classes added after the registration period are subject to the regular tuition rate and no discount will be applied _____ (initial)

Photo Release:

I hereby grant permission to LDS to photograph or videotape me/my child(ren) and to use photographs or videotapes of me/my child(ren) on LDS web sites or other electronic form or media, and to offer the photographs for use or distribution without notifying me. I hereby waive any right to inspect or approve the photographs or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the photographs and/or videos. _____ (initial)

Credit Card on File for Automatic Payment Customers :

I agree to leave on file with LDS a copy of my credit card to be debited on the 1st of the month for tuition payments, and I hereby agree and authorize LDS to process any outstanding balances on my account to my credit card on file prior to the Annual Dance Recital. _____ (initial)

Release and Indemnification:

I hereby assume full responsibility for any and all damages, injuries, or losses that I/my child(ren) may sustain or incur in anyway while attending or participating in any LDS class or activity. I hereby waive any and all claims against the staff, owner/operators, their spouses, individually or otherwise, of LDS, for any injuries I/my child(ren) may sustain while attending or participating in any LDS class or activity. I fully understand that any medical treatment given to me/my child(ren) will be for first aid only and that this form can be photocopied for emergency treatment. For and in consideration of the acceptance of me/my child(ren) in any LDS class or activity, I/we hereby release, forever discharge, and agree to hold harmless LDS from and against any claims, damages, injuries, or liability arising from or relating to my/my child(ren)'s participation in any LDS class or activity, and the use of photographs or videotapes of me/my child(ren), including but not limited to any re-use, distortion, blurring, alteration, optical illusion or use in composite form, either intentionally or otherwise, that may occur or be produced in production of the finished product. I have read this release and I fully understand the contents, meaning and impact of this release. _____ (initial)

LEGACY DANCE STUDIO, LLC RESERVES THE RIGHT TO UNILATERALLY CHANGE THE FOREGOING TERMS AND CONDITIONS AND WITHOUT NOTICE. _____ (initial)

LEGACY DANCE STUDIO, LLC ALSO RESERVES THE RIGHT TO CANCEL AND/OR CHANGE CLASSES DUE TO CLASS ENROLLMENT OR SCHEDULING CONFLICTS WITH NO PRIOR NOTICE. _____ (initial)

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____