Credit Card:

# Exp. Date: Sec. Code: \_\_\_\_\_

E-mail (Please Print!) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(All important information will come to this address)

Cell Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(All Text Reminds will go to this phone number)

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: M / F

Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State: \_\_\_\_\_\_\_\_Zip: \_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List any medical problems or allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

New Student: YES / NO If yes, how did you hear about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*Office Use Only \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***

**Class: Class Day & Time: Tuition: 5 Mo.**

 **Recital Fee:**

|  |  |  |  |
| --- | --- | --- | --- |
| * Pre-School Combo
 |  |  |  |
| * Acrobatics
 |  |  |  |
| * Ballet
 |  |  |  |
| * Clogging
 |  |  |  |
| * Jazz/HH Fuze
 |  |  |  |
| * STARZ Clog CO
 |  |  |  |

**Payments 2021-2022**

 Tuition Due Late Fee Paid Method Date

Reg. Fee \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rec. Fee Full\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Aug 2021 \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sep 2021 \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Oct 2021 \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Nov 2021 \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dec 2021 \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Jan 2022 \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Feb 2022 \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Mar 2022 \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Apr 2022 \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dianne’s School of Dance

\*\*\*\*Financial Agreement and Terms of Enrollment\*\*\*\*

Submitting this form means that you have read the 2021-2022 Policies & Procedures and accept the following, “I hereby enroll my child for the entire year and agree to follow all payment policies, dress codes, and other rules and regulations as stated in the policies.”

I understand that all tuition payments are non-refundable except any unused, pre-paid tuition and agree to pay the late fees for late tuition payments and the Returned Check Fee. Dianne’s School of Dance has a “No Refund Policy” on Registration Fees, Missed Classes, or Recital Fees.

Also, “I acknowledge that all tuition is due by the 1st of each month. Payments received after the 10th of each month will result in a $15 late fee automatically added to the account.”

I understand that the Recital Fee for Recreational Students is $150. This fee can be made in 5 installments or in full. I agree to pay these fees by the due dates.

I also understand in order to withdraw from the program without paying for the month, I must fill out a withdrawal form at the front desk or I will be responsible for payments due at that time. Also, in order to change or add a class, I must speak with the office manager to make the appropriate changes to my account.

I agree to give Dianne’s School of Dance LLC, the absolute right and permission to use my child’s photographs in publication, print ad, social media, or other forms of promotion. We will only use first names in publications.

As a parent / guardian of above student, I understand that Dianne’s School of Dance, LLC cannot be responsible for any injuries or damages suffered by my child during his / her participation in activities associated with Dianne’s School of Dance, LLC. With this knowledge, I consent to my child’s participation in the dance program. I further consent to my child’s participation in activities associated with these dance programs. I agree that neither my child or I, as a parent / guardian, will institute any legal action or assert any claim against Dianne’s School of Dance, LLC for any injury or damages experienced by the student. In an emergency situation, I hereby grant permission for a staff member to seek emergency medical treatment for my child.

In case of Mandatory closings out of our control due to pandemics, etc., DSOD will offer alternate classes via internet or other methods.

I agree to regularly check my emails, Student folder, & text reminds about weekly information keeping me informed of DSOD events and notices.

Dianne’s School of Dance LLC, and its employees are not responsible for students, parents, or any guardian’s failure to follow these guidelines.

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_