

STUDIO C SCHOOL OF DANCE

8887 BASIL WESTERN ROAD
CANAL WINCHESTER, OH 43110
614-834-4480

ENROLLMENT FORM

STUDENTS INFORMATION:

DATE: _____

NAME: _____

ADDRESS: _____

CITY: _____ ZIP: _____

AGE: _____

BIRTHDATE: _____

PREVIOUS DANCE
TRAINING: _____

MEDICAL INFORMATION
ALLERGIES
ETC.: _____

PARENT GUARDIAN INFORMATION:

NAME: _____

EMAIL ADDRESS: _____

HOME PHONE: _____ CELL: _____

WORK NUMBER: _____

EMERGENCY CONTACT (OTHER THAN PARENT)

NAME: _____ PHONE NUMBER: _____

HOW DID YOU HEAR ABOUT STUDIO C?

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STUDIO POLICIES

I AM AWARE OF THE FOLLOWING:

- **REGISTRATION AND FIRST MONTH'S TUITION IS DUE AT THE TIME OF REGISTRATION.**
- **DANCE TUITION IS BASED ON A NINE MONTH SESSION WHICH IS BROKEN DOWN INTO MONTHLY PAYMENTS.**
- **TUITION IS DUE BY THE FIRST OF EACH MONTH NO MATTER HOW MANY WEEKS ARE IN THE MONTH.**
- **THERE IS A \$15.00 LATE CHARGE ASSESSED IF MY TUITION IS NOT PAID BY THE 10TH OF THE EACH MONTH.**
- **THERE IS A \$35.00 NSF CHARGE PER RETURNED CHECK....STUDIO C WILL NOT EXCEPT PERSONAL CHECKS IF THIS IS REPEATED**
- **STUDIO C WILL NOT MAKE UP SNOW CANCELLED CLASSES UNLESS THERE ARE MORE THAN 2 CLASSES MISSED**

NON-REFUNDABLE REGISTRATION:

DANCE

\$30.00 1ST STUDENT

\$15.00 2ND STUDENT

\$50.00 3 OR MORE STUDENTS PER FAMILY

DANCE

\$38.00/MONTH- ½ HOUR CLASS PER WEEK

\$43.00/MONTH- 45 MIN CLASS PER WEEK

\$47.00/MONTH- HOUR CLASS PER WEEK

\$30.00 /TECHNIQUE CLASSES--- NO DISCOUNTS APPLIED

\$190.00/MONTH- UNLIMITED CLASSES FOR FIRST FAMILY MEMBER/225.00-UNLIMITED ENTIRE FAMILY

FIRST CLASS/FIRST STUDENT PER FAMILY...REGULAR PRICES

ADDITIONAL CLASSES ARE DISCOUNTED \$5.00

COSTUME FEES: RECREATIONAL DANCE

COSTUME FEE DOWN PAYMENT OF \$30.00 IS DUE BY OCTOBER 15TH

COSTUME FEE BALANCE ARE DUE BY DECEMBER 1ST

(THIS WILL INCLUDE TIGHTS AND ACCESSORIES YOUR CHILD WILL NEED BUT WILL NOT INCLUDE THE PROPER DANCE SHOE)

RECITAL FEE IS \$100.00 (per family) AND IS DUE BY MAY 1ST

(This will include a recital DVD from each show your child performs in and no tickets will be sold).

- THE TUITION EACH MONTH WILL REMAIN THE SAME REGARDLESS OF THE NUMBER OF WEEKS IN THE MONTH OR WHETHER MY CHILD IS PRESENT FOR CLASS.
- THERE ARE NO REFUNDS IF MY CHILD MISSES ANY CLASSES.
- I AGREE TO PAY FOR THE COSTUME OR COSTUMES AND IN ADDITION TO REHEARSAL/RECITAL FEES.
- ANY COSTUME ORDERED FOR MY CHILD CANNOT BE RETURNED NOR ARE ANY CHARGES SUCH REFUNDABLE INCLUDING (RECITAL, REGISTRATION, OR TUITION FEES) SHOULD I WITHDRAW MY CHILD FROM THE RECITAL OR STUDIO C.

I UNDERSTAND AND AGREE TO THE ABOVE TERMS:

SIGNATURE _____ DATE _____

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WAIVER, RELEASE AND HOLD HARMLESS AGREEMENT

In consideration of the permission and privilege allowed the child to participate in the dance activities of Studio C School of Dance, the undersigned, on behalf of himself, the child and any other parent release, discharge and or otherwise specifically agree to indemnify, save and hold harmless STUDIO C SCHOOL OF DANCE, its owners, agents, and employees, as well, as all other participants in the dance program, from any and all losses, claims actions or proceedings of every kind and character which may be presented or initiated to recover money, property damages for any injuries to the students or for any other damages suffered during the conduct of the above-described, the undersigned.

In accepting the permission and privilege to participate, the undersigned understand that this Agreement extends to and applies to any personal injuries results, damages, losses or consortium claims allegedly experienced or suffered while the students engages in the dance program classes or the other activities. The undersigned agrees not to file suit or initiate any claim procedure in respect to any personal injuries, property damages, consortium claims or losses which they may experience or sustain, arising directly out of activities or emergency medical care arranged by STUDIO C SCHOOL OF DANCE or its agents.

The undersigned, on behalf of themselves and their minor, freely assume all risks, hazards and losses which may befall them in connection with their participation in the dance program, related activities and emergency medical care.

This agreement is binding upon our administrators, executors, heirs, and assigns. My boy/girl/me is and must be covered by our own medical insurance.

Students

Name: _____

Parent

Signature: _____ Date _____