

**REGISTRATION FORM, POLICIES, RELEASE OF LIABILITY,
AND TUITION/PAYMENT AGREEMENT
2019-2020 SEASON**

STUDENT or MINOR CHILD

Student's Name _____ Date of Birth _____
Address _____ City _____ State _____ Zip _____
Telephone: _____ Cell: _____ Email: _____
Height _____ Weight _____ Gender _____ Male _____ Female _____
School _____ Grade _____

PARENT/GUARDIAN INFORMATION (if student is under 18)

Mother _____	Father _____
Phone (home) _____	Phone (home) _____
Phone (work) _____	Phone (work) _____
Phone (cell) _____	Phone (cell) _____
Email: _____	Email: _____

MEDICAL INFORMATION (Please use back if necessary)

To provide your child/ward with a positive experience PLEASE disclose any known medical or mental conditions that may require our attention:

Allergies: _____

Medications / Dosages _____

Physician's Name _____ Phone _____

Address _____ Hospital _____

Insurance Company _____ Name of Insured _____

Policy # _____ ID # _____ Relationship _____

EMERGENCY CONTACTS

The following named people are to be contacted should the Owner, Instructor, Staff or Volunteer be unable to reach a parent/guardian identified above, and shall be authorized to act on behalf of the parents/guardians in the absence of the parents/guardians:

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

AUTHORIZATION TO OBTAIN MEDICAL TREATMENT IF NECESSARY FOR STUDENT (18 or older) or AUTHORIZATION FROM PARENT or GUARDIAN IF HE/SHE IS NOT AVAILABLE TO MAKE THIS DECISION (if under 18).

I give FULL PERMISSION to Dancin! Performing Arts Center, its Owner(s), Director(s), Staff, Employee(s), Independent Contractor(s), and/or Volunteers, the legal right to choose or decide what medical attention be provided, should the need arise, when the student(s) cannot make this decision (if under 18 yrs of age) or parent/guardian for the student(s) under 18 yrs of age is not present to make this decision.

INITIAL _____ DATE _____

RELEASE - MEDICAL EXPENSES & FINANCIAL RESPONSIBILITY

I understand fully that either the student or performer, his or herself and/or parents/family and/or legal guardians whose names appear above and initials and signature appear below, is/are fully responsible for their own actions and the actions of the student and will be fully responsible for medical and/or dental care, financial responsibilities, bills and insurances should any injury occur while taking lessons, auditioning, rehearsing, or performing for/at Dancin!.

INITIAL _____ DATE _____

RELEASE OF LIABILITY AND ASSUMPTION OF RISK

IN CONSIDERATION OF my minor child/ward being allowed to participate in any way in the Dancin! Performing Arts Center classes, auditions, rehearsals, performances, events or activities, the undersigned acknowledges, appreciates, and agrees that:

1) The risk of injury to my child/ward from the activities involved in Dancin! Performing Arts Center classes, events, and activities is significant, including the potential for permanent disability and death, and while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist; and,

2) FOR MYSELF, SPOUSE/OTHER PARENT, AND CHILD/WARD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE Dancin! Performing Arts Center Owner(s), Director(s), Staff, Employee(s), Independent Contractor(s), Volunteers and/or others, and assume full responsibility for my child's/ward's participation;

3) I willingly agree to comply with the program's stated and customary terms and conditions for participation in Dancin! Performing Arts Center classes, auditions, rehearsals, performances, events and activities. If I observe any unusual circumstances or have a significant concern regarding my child's/ward's readiness for participation in any class, rehearsal, performance, event and activity, I will remove my child/ward from the Dancin! Performing Arts Center class, audition, rehearsal, performance, event or other activity and bring such circumstance/concern to the attention of the nearest Owner, Instructor, Staff Member or Volunteer immediately; and

4) I myself, my spouse/other parent, my child/ward, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE THE other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct any Dancin! Performing Arts Center event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my child's/ward's involvement or participation in any Dancin! Performing Arts Center class, audition, rehearsal, performance, event or activity, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law;

5) I, for myself, my spouse/other parent, my child/ward, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS Dancin! Performing Arts Center Owner(s), Director(s), Staff, Employee(s), Independent Contractor(s), Volunteers, others, and/or all of the above Releasees from any and all liabilities incident to my child's/ward's, as well as my own, involvement or participation in these Dancin! Performing Arts Center classes, auditions, rehearsals, performances, events or activities, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law;

6) I understand the seriousness of the risks involved in participating in any Dancin! Performing Arts Center class, audition, rehearsal, performance, event or activity, and my personal responsibilities for adhering to rules and regulations, and accept them as a participant for myself and on behalf of my child/ward.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY INITIALING AND/OR SIGNING IT, AND INITIAL AND/OR SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

INITIAL _____ DATE _____

PHOTOGRAPHIC and VIDEO RELEASE

I, (Performer (if 18 or Parent/Guardian if under 18) give my consent and hereby release all rights of any kind to Dancin! Performing Arts Center for media productions, presentations, and sales thereof in which I/my child/ward appears. This release and consent pertains to all forms of recording, storage, and transmission of broadcast, cable or other signals.

This is a full release of all claims that I, my family, and heirs have against Dancin! Performing Arts Center including but not limited to its Owner(s), Director(s), Staff, Employee(s), Independent Contractor(s), Volunteers, or others including Amanda Coulson Deale and Family.

I understand that it is the purpose of Dancin! Performing Arts Center to use this material in a legitimate manner, which is not intended to cause any harm or undue embarrassment. I understand that this release form not only covers the entire period for which I/my child/ward am with Dancin! Performing Arts Center, but also after my/my child/ward departure from the company, in perpetuity.

INITIAL _____ DATE _____

TUITION and PAYMENT AGREEMENT

Agreement made this _____ day of _____, 2019, by and between Dancin! Performing Arts Center (hereinafter known as Dancin!) and _____ (Person responsible for tuition payment hereinafter known as Responsible Party) for dance instruction provided by Dancin!. The term of this Agreement is for one (1) dance season, commencing on _____, 2019, and terminating on August 1, 2020.

REGISTERED CLASSES	LEVEL	DAY	CLASS TIME

REGISTRATION FEE, ANNUAL TUITION, DROP IN HOURLY RATES, COMPETITION FEE(S), BALLET ASSESSMENT, RECITAL FEE, & COSTUME FEE(S)

1. REGISTRATION FEE is due at time of registration.
2. ANNUAL TUITION

FULL (ANNUAL) TUITION AMOUNT: \$_____ Can be paid in full at time of Registration with a 10% Discount or in Ten (10) equal monthly payments with no Discount. The first payment is due at the time of Registration. A 10% discount will be given for siblings and/or parents who take classes.

MONTHLY INSTALLMENTS NUMBER OF INSTALLMENTS: _____ EACH INSTALLMENT AMOUNT: \$_____ INSTALLMENT/MONTHLY PAYMENT DUE ON THE 1ST OF EACH MONTH. IF THE NUMBER OF CLASSES CHANGES DURING THE 2019-2020 SEASON, THE MONTHLY AMOUNT WILL BE MODIFIED.

Dancin!'s annual season runs for approximately ten (10) months a year. Traditionally, Dancin! is closed July and early August. Annual Tuition can be paid in full at the time of registration with a 10% discount or paid in ten (10) equal monthly payments with no discount. Missed classes for any reason and/or recess/holiday periods (we follow the school calendars for holiday periods) cannot be deducted from the regular monthly tuition payment. Makeup classes will be offered if we close for snow days. Tuition is calculated on an ANNUAL AMOUNT BASIS and divided into 10 equal monthly payments. November and December payments are due November 1st and May and June payments are due May 1st.

Making monthly payments will be done in one of two ways, either by credit card or debit from your bank account. Payments will automatically be made on the first of each month by Jackrabbit, the studio management system. When registering on Jackrabbit, you will be asked to choose the method of payment that you prefer, credit card or check/bank draft. You will be asked to fill out your credit card information or bank account information to include routing number and account number.

- Check here if paying by credit card. Your credit card will be charged on the 1st of each month.
- Check here if you prefer to make monthly installment payments by check or cash.

A \$25.00 late fee will be assessed and automatically charged to the Responsible Party if payment has not been received by the 7th of each month. If payment has not been received by the 7th of each month, the Student will not be able to attend class until tuition and the late fee has been paid.

IF PAYING BY CREDIT CARD - CREDIT CARD INFORMATION REQUIRED AT TIME OF REGISTRATION

I understand and authorize Dancin! to charge my credit card for my monthly installment payment, and/or other fees to include recital fees & costume down payments. If I have opted to pay by check or cash and my monthly tuition has not been received by the 7th of the month, I authorize Dancin! to charge the monthly tuition installment payment and late fee to my credit card on file. A 3% credit card processing fee is added to each credit card transaction.

Type of Card: _____ Visa _____ Mastercard _____ Discover _____ American Express

Name on Card: _____

Account/Card Number: _____ Expiration Date: _____ Security Code on Back: _____

Billing Address of Card: _____

AUTHORIZATION SIGNATURE _____ DATE _____

IF PAYING BY AUTOMATIC BANK ACCOUNT DEBIT - BANK ACCOUNT INFORMATION REQUIRED AT TIME OF REGISTRATION

I understand and authorize Dancin! to debit my bank account for my monthly installment payment, and/or other fees to include recital fees & costume down payments. If I have opted to pay by check or cash and my monthly tuition has not been received by the 7th of the month, I authorize Dancin! to charge the monthly tuition installment payment and late fee to my bank account on file. If there is insufficient funds in the bank account, I understand that my credit card on file plus a 3% credit card processing fee will be charged.

Name on Bank Account: _____

Name of Bank: _____ Branch: _____

Bank Routing Number: _____ Checking Account Number: _____

AUTHORIZATION SIGNATURE _____ DATE _____

3. **DROP IN RATE** - IF YOU ARE CHOOSING THE "DROP IN HOURLY RATE" RATHER THAN ANNUAL TUITION, THE FEE IS PAYABLE AT THE TIME OF THE CLASS. Drop In students are not eligible to participate in recitals, performances, competitions and other Dancin! student programs and activities.

4. **RECITAL FEE/COSTUME COSTS** - A Recital Fee of \$50.00 and a Recital Costume down payment of \$50.00 per costume (adjusted to actual cost at time of Purchase) is due no later than February 1, 2020 . You have the option of pre-paying in full at the time of registration, pay in full no later than February 1st, or these Fees can be included in your monthly Installment.

5. **BALLET & TAP ASSESSMENT and COMPETITION FEE** - Students who participate in Ballet Assessments and/or Competitions will be informed of the fees and details when Dancin! receives this information.

6. **REQUEST OF STUDENT TO CHANGE SCHEDULE OR OPT OUT** - Written notice is required for all requested changes in schedule or if you would like to opt out of this Agreement. A Student may change their schedule or terminate this Agreement by giving Dancin! thirty (30) days written notice. If written notice to change the schedule or to terminate this Agreement is not provided, the Agreement will continue to be in force and payments will remain as agreed to in Section 5. Opting out or terminating this Agreement will not be accepted after April 1st of each season.

7. **REFUNDS** - There are NO refunds for missed classes, changed schedules, costume fees, or termination of this Agreement unless agreed upon by Dancin!.

8. **RETURNED CHECK/INSUFFICIENT FUNDS** - A \$30.00 fee will be charged for any check that is returned for insufficient funds. Responsible Party authorizes Dancin! to charge the credit card on file for the amount of the returned check plus the \$30.00 fee for same.

9. **BILLING** - Dancin! does not send bills during the regular season. Dancin! may, from time to time, telephone or email a Responsible Party for monies due under the terms of this Agreement.

10. **COLLECTION OF MONIES PAST DUE** - Accounts that are thirty (30) days past due will be sent to pre-collection status. Once an account becomes sixty (60) days past due the outstanding balance will be sent to collection. Dancin! may, in it's discretion, retain a collection agency or and/or an attorney to collect amounts past due. The Responsible Party understands and agrees that they will assume all financial responsibility of Dancin!'s collection costs to include fees paid to collection agencies and/or attorneys, whether suit is brought or not, to include all pre and/or post collection/lawsuit costs.

INITIAL _____ DATE _____

NON-DISCLOSURE AGREEMENT

Students, Family Members or any other Representative agree not to disclose or reproduce any information regarding studio operations, choreography, staging, music, costumes, designs, client lists, student information and family and/or contact information. This information is the property of Dancin!.

INITIAL _____ DATE _____

RESPONSIBILITY AGREEMENT

The Student, Family Member, or any other person associated with the Student, who enters any studio or any other premises used by Dancin!, will be held responsible for any and all of their actions to include any or all damage to or loss of property belonging to Dancin!, whether owned or rented, or any other person or party. The Responsible Party agrees to and will assume financial responsibility for the repair and or replacement of any damaged and or lost property of Dancin! or any other party.

INITIAL _____ DATE _____

MISSED CLASSES

A missed class may be made up by attending another class listed on the Dancin! Performing Arts Center schedule, preferably of the same style and age/level. The Student must request a make up class before attending and this request must be made within one (1) month of missing the class.

INITIAL _____ DATE _____

DANCINI'S RIGHT TO MAKE CHANGES

Dancin! reserves the right to make changes of class schedules and/or instructors at anytime.

INITIAL _____ DATE _____

I, the Student (if 18 or older), or Parent/Guardian (for students under 18 years of age) have filled out this form accurately. I have read, and fully accept and understand all sections, terms, and conditions of this Agreement.

Signature _____ Printed Name _____ Relationship to Student _____ Date _____