

# REGISTRATION FORM

THE DANCE EXTENSION, LLC

Parent/Guardian Name \_\_\_\_\_ Relation to Student(s) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Emergency Contact/Cell Phone \_\_\_\_\_

Mother: \_\_\_\_\_ Work Phone \_\_\_\_\_ Father: \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail \_\_\_\_\_ Check for registration confirmation by email

How did you learn about the Dance Extension? Newspaper \_\_\_\_\_ Yellow Pages \_\_\_\_\_ Website \_\_\_\_\_ Referred by \_\_\_\_\_

Student #1 Name \_\_\_\_\_ Date of Birth: \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Student #2 Name \_\_\_\_\_ Date of Birth: \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Allergies/Physical limitations/Medical conditions: \_\_\_\_\_

If new, list previous dance study: \_\_\_\_\_

## STUDENT #1

## STUDENT #2

CLASS	STUDIO	DAY/TIME	# Hr(s)
Total # hours/week:			

CLASS	STUDIO	DAY/TIME	# Hr(s)
Total # hrs/week:			

Select Payment Plan:  Easy Pay (Monthly Debit/Credit Card)  In Studio (Monthly Cash/Check)  Semester  10 Week Session  Class Card

Annual Registration Fee (\$20/Individual or \$25/Immediate Family)

\$ 20/\$25

Student #1 Tuition (payment of 1<sup>st</sup> month, semester, session is required to secure space):

\$ \_\_\_\_\_

Student #2 Tuition (payment of 1<sup>st</sup> month, semester, session is required to secure space):

\$ \_\_\_\_\_

Total Enclosed:

\$ \_\_\_\_\_

**Please read & sign the registration agreement below and return with payment to The Dance Extension, 8 Chapman Avenue, Quaker Hill, CT 06375 no later than to September 1, 2010 to insure class placement. Call for availability after this time. Thank you!**

### REGISTRATION AGREEMENT-- For the purpose of this agreement, "student" herein refers to all registered students.

I understand tuition for the current term, September 2010 – May, 2011, must be paid according to the payment plan selected above (either in nine (9) equal monthly installments due on or before the first day of each month, in two (2) semester installments due on 09/09/10 & 01/17/11, by session or class card). Tuition is payable by cash or check payable to The Dance Extension, LLC, or online by credit/debit card, and a non-refundable annual registration fee is due at the time of registration. **I understand The Dance Extension, LLC issues statements for overdue accounts only. I agree to pay an increased tuition rate (\$7 additional as outlined in the tuition chart) if payment is paid or postmarked after the 10<sup>th</sup> day of any month regardless of absence, illness weather, class cancellation, vacation, etc; a \$10 end of month late fee with payments paid or postmarked after the last day of the any month; and a \$25.00 fee for each declined charge for any reason (insufficient funds, expired card, lost card, etc.) and/or each check returned by the bank.**

**I understand I am responsible for payment of the entire term in which the student is registered; tuition is non-refundable; and in the event of absence, payment must be mailed to Dance Extension, 8 Chapman Avenue, Quaker Hill, CT 06375. I agree to submit advanced written notification to The Dance Extension, LLC prior to the first day of the month/semester/session in order to withdraw the student from class(es) for the following month/semester/session and cancel this contract. I understand my account will remain open and I am responsible for tuition payments and late fees regardless of absence until such notification is received by The Dance Extension, LLC.** I understand it is the student's privilege to make up missed classes in a class other than one in which the student is registered; make ups must be completed during the same semester as the absence; students may not take makeup classes for another student's absence; tuition will not be refunded or pro-rated for unattended or canceled classes; and refunds in the case of prolonged illness or injury must be verified by a physician's certificate and are at the discretion of the director.

I understand The Dance Extension, LLC reserves the right to cancel a class due to insufficient enrollment; to refuse registration if a class has reached capacity; to substitute a qualified instructor in the absence of the regularly scheduled teacher; to photograph and use in publicity all photos & videos taken on the premises; to terminate without refund the enrollment of any student for failing to comply with studio policies.

I hereby release The Dance Extension, LLC, its officers, directors, employees, and agents from any and all liability which may result from the conditions on or about the business premises, operations of the business premises or any other facilities used for The Dance Extension, LLC functions, from the student's participation in dance or other activities while at said premises. The person hereinafter signing this contract on behalf of the student accepts full responsibility for any and all such damage or injury of any kind which may result to the student from any cause. **I agree to advise The Dance Extension, LLC in writing of all pre-existing physical and/or medical conditions, including allergies, of said student.**

I agree that as a condition of the student being allowed to use the facilities of The Dance Extension, LLC or any other facilities used by The Dance Extension, LLC for any other functions, that I freely accept and voluntarily assume any and all risk of property damage, personal injury or death resulting from said use. By signing below I likewise agree not to hold The Dance Extension LLC, its officers, directors, employees or agents, liable for any property damage, personal injury or death that results in any way during my presence at The Dance Extension, LLC and the use of its facilities.

I agree to and understand all the terms and conditions of this agreement and those outlined in the studio handbook, and acknowledge agreement with my signature below.

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

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

Printed Name: \_\_\_\_\_