

# CONSERVATORY OF DANCE

## SUMMER REGISTRATION FORM 2017

### ACCOUNT INFORMATION

Input: \_\_\_\_\_

Initials: \_\_\_\_\_

**PARENT:**  Returning Family please check this box and only fill out sections that have changed.

First Name: \_\_\_\_\_ Address: \_\_\_\_\_

Last Name: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

 Mother  Father  Grandparent Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Employer: \_\_\_\_\_

E-mail: \_\_\_\_\_

### STUDENT INFORMATION

First Name	Last Name	Male/Female	Birth Date
1.) _____	_____	M / F	____ / ____ / ____
2.) _____	_____	M / F	____ / ____ / ____
3.) _____	_____	M / F	____ / ____ / ____

### EMERGENCY CONTACT (If different from above)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

#### "HOW DID YOU FIND OUT ABOUT CONSERVATORY OF DANCE?"

 FRIEND  NEWSPAPER  WEBSITE  MAILING  OTHER \_\_\_\_\_

### SIGNATURE REQUIRED *By signing this form, I acknowledge the Conservatory of Dance policies and will abide by them.*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

#### Please read and initial below, indicating that you understand and agree to the following:

\_\_\_\_\_ Registration/Tuition Fees: Full tuition is due on the 1<sup>st</sup> of every month regardless of attendance.

\_\_\_\_\_ Photographs: Conservatory of Dance is hereby granted permission to take photographs of students to use in brochures, websites, posters, advertisements and other promotional materials created by the school. Permission is also hereby granted for the school to copyright such photographs in its name.

\_\_\_\_\_ Withdrawing a Student: Should it become necessary to discontinue classes for any reason, a phone call or email must be made prior to the 1<sup>st</sup> of the month in which the student will no longer be taking classes. Otherwise, tuition charges will continue to incur, regardless of attendance. I understand that this is the procedure I need to follow in order to withdraw my child from class.

\_\_\_\_\_ As a parent or legal guardian of the student registering on this form, I give permission for this student to participate in dance classes and performances with Conservatory of Dance. In consideration of receiving dance instruction including special classes in ballet, tap, jazz, hip-hop, pom, lyrical, musical theatre, etc., I release Conservatory of Dance and its owners, instructors and employees of any and all claims for damage of any kind which may grow out of receiving dance instruction or participation in dance classes or performances. I further release and agree to indemnify and hold harmless Conservatory of Dance and its owners, instructors and employees from any demands, claims or causes of action, suits or liabilities as a result of participation in dance instruction, classes or performances.

#### Please check YES or NO below AND initial, indicating you read the following (students over the age of 12 yrs):

\_\_\_\_\_ We are sometimes approached by students requesting medication for a headache or other minor ailments.  
Do we have permission to dispense medication to your student, per the manufacturer's recommended dosage?

Tylenol: Yes \_\_\_\_ No \_\_\_\_ Ibuprofen: Yes \_\_\_\_ No \_\_\_\_

# CONSERVATORY OF DANCE

## SUMMER REGISTRATION FORM 2017

### REGISTRATION INFORMATION

CLASS	DATE	PRICE	DUE DATE
Musical Theatre Workshop • Week 1 • 9-4pm	June 5-9	<input type="checkbox"/> \$250	June 1
Musical Theatre Workshop • Week 2 • 9-4pm	June 12-16	<input type="checkbox"/> \$250	June 1
Dance Camp • Week 1 • 9-4pm	June 19-23	<input type="checkbox"/> \$250	June 1
Dance Camp • Week 2 • 9-4pm	June 26-30	<input type="checkbox"/> \$250	June 1
Princess Dance Camp • Week 1 • 9-1pm	June 19-23	<input type="checkbox"/> \$175	June 1
		<b>Discount</b>	- \$ _____
		<b>Total Due June 1st*</b>	\$ _____
CLASS	DATE	PRICE	DUE DATE
Dance Camp • Week 3 • 9-4pm	July 10-14	<input type="checkbox"/> \$250	July 1
Princess Dance Camp • Week 2 • 9-1pm	July 10-14	<input type="checkbox"/> \$175	July 1
Ballet/Contemporary Intensive • Week 4 • 9-4pm	July 17-21	<input type="checkbox"/> \$300	July 1
		<b>Discount</b>	- \$ _____
		<b>Total Due July 1st*</b>	\$ _____

### PAYMENT INFORMATION

#### AUTOMATIC PAYMENT CONSENT FORM

##### CARD HOLDER'S INFORMATION

FIRST NAME: \_\_\_\_\_ MIDDLE INITIAL: \_\_\_\_ LAST NAME: \_\_\_\_\_

STUDENT'S NAME (First & Last): \_\_\_\_\_

CARD #: \_\_\_\_\_ EXP: \_\_\_\_ / \_\_\_\_ CVN: \_\_\_\_\_

I hereby authorize Conservatory of Dance to charge my account the tuition amount of \$ \_\_\_\_\_ on the June 1st.

I hereby authorize Conservatory of Dance to charge my account the tuition amount of \$ \_\_\_\_\_ on the July 1st.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

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

*By signing above, I acknowledge that I have read, and understand and agree to Conservatory of Dance's Automatic Payment Consent Form.*