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REGISTRATION FORM 2017-2018

Please be sure to give your
Email address and print
clearly

Child's Full Name _____ Age _____ Date of Birth _____

Address _____ City _____ Zip _____

Home Phone _____ Email _____

Mother's Name _____ Work Phone _____ Cell Phone _____

Father's Name _____ Work Phone _____ Cell Phone _____

Please list if Child has any known allergies: _____

If you are interested in AUTOMATIC BILLING each month, please complete the following CC information

Credit or Debit Card Information number _____

Billing Address if different from home address: _____

Name on Credit Card _____ Exp. Date _____ Code _____

Class Name _____ Day _____ Time _____

Solo Teacher's Name _____ Day _____ Time _____

Duet Teacher's Name _____ Day _____ Time _____

Trio Teacher's Name _____ Day _____ Time _____

I am the parent/guardian of _____ and I certify that my child has no known conditions that prohibit or limit participation in classes at Miss Colleen's Elite Dance Centre. I assume ordinary risks when using the facilities and agree not to hold the studio or any of their instructors liable for any injury sustained as a result of participation in classes and recital. I will see that my child will be supervised prior to and after his/her dance class. In case of accident/injury and the aforementioned cannot be reached, I grant Miss Colleen's Elite Dance Centre permission to, if necessary, obtain medical attention for my child. I understand that Miss Colleen's Elite Dance Centre retains the right to any photographs taken at the studio to be used for publicity or advertising. Miss Colleen's Elite Dance Centre is a public facility and cannot be held responsible for personal items. By signing below, I certify that I have read and understand this document and accept all enrollment conditions.

PLEASE READ AND SIGN

CONTRACT 2017-2018

I understand and agree to the following for the 2015-2016 school year: (initial each item and sign bottom)

___ I have fully read the front portion of the contract and agree to all the terms.

___ The dance season will begin in September and end in June. Tuition will be broken down into 9 equal payments. Each payment is due no later than the 15th of the following months: September, October, November, December, January, February, March, April, and May.

___ I understand that if my scheduled dance payment is more than 30 days past due, I will be charged a \$20.00 late fee for every month that passes.

___ I understand that any younger siblings with the lesser amount of classes enrolled in dance class will receive a sibling discount of 5% off their yearly tuition.

___ I understand that if I pay my tuition in full in September, I will receive a 5% discount. This discount is not offered after September 30th.

___ I agree to pay a **non-refundable** \$90.00 costume fee for each class my child is enrolled in. This payment is due in full by the first of October. If I do not make this payment, I understand that a costume will not be ordered for my child and they will be unable to participate in the recital. Studio is not responsible for any alterations.

___ I understand that all costumes are ordered by October 15th. If my child drops a class after October 15th, I am still responsible for the costume(s) payment.

___ I understand that if I switch class mid-year, I will be charged an additional \$65.00 for the class towards a new costume.

___ I understand that if my tuition is not paid in full for the year, I will be unable to purchase recital tickets and my child will be unable to dance in his/her scheduled performance(s), even if I have already purchased a costume. There will be NO exceptions to this rule. All tuition must be paid in full by May 15th.

___ I understand that there are no refunds for missed classes. My child can take a make-up at any time in a class that is either the same level or a level below.

___ I understand that the class schedules are subject to change and are dependent upon enrollment. The Elite Dancentre reserves the right to cancel a class if there is not a sufficient number of children enrolled by the beginning of the season.

___ I understand that the Elite Dancentre also holds the right to cancel dance class at any time due to weather conditions, or a teacher's illness. I also understand that a make-up class may not be given for that class and the teacher will direct me to a time and day that a class can be taken of the same level and same discipline.

___ **I understand that there is no guarantee that siblings will be in the same recital performance.**

___ **I understand that the studio cannot guarantee any requests for recital day, time or dance number.**

___ **I understand that the only children to be released after they dance at the recital are the 45 minute Intro to Dance class.**

___ **I understand that all children, except 45 minute Intro to Dance class, must stay for the entire recital.**

___ I understand that I may choose to have my monthly fee automatically billed to an assigned debit or credit card.

___ **I understand that if my child decides to drop class I am responsible for notifying the front desk or I will be continually billed.**

___ I understand that the studio is not responsible for lost or stolen items.

Parent Signature _____ Date _____