

DANCE FEVER 2009-2010 REGISTRATION FORM

Name: _____ Phone: _____

E-Mail: _____ Cell Phone: _____

Parent's name(s): _____

Address: _____

City: _____ State: _____ Zip code: _____

Please register my child for the following class(es) (Please see schedule for class times and days) Age Group: _____ Day(s): _____

Please make checks payable to **Dance Fever Studio**.

2 equal checks: 09/01/2009 and 02/ 01/ 2010 OR **5 equal checks:** 09/01/2009, 11/01/2009, 01/01/2010, 03 /01/2010, 05/01/2010 must all be received by the studio before the **first class**. Session tuition is refundable with two week cancellation notice before the beginning of the session. A non-refundable \$100 charge will be assessed as a registration fee for all applicants, \$50 charge if joined DF after February 1st, 2010. Each session lasts two months. Students admitted after the session has begun are eligible to pay a prorated amount. Partial payments will NOT be accepted; tuition per session has to be paid in full. Students with outstanding balances will NOT be admitted into the class. **Please refer to the Dance Fever Policy for more detailed information.**

We wish to enroll our child in the Dance Fever Studio Program. We agree to pay \$ _____ per session installments.

- There will be no refunds or credits for missed lessons. A maximum of 2 make-ups per session can be scheduled in advance.
- Recital costumes are required for each participating student and are due in November. The price for a costume is \$60.00. Each class that your child is enrolled in requires a costume.
- The studio is closed for Labor Day, Halloween, Thanksgiving Holidays, Christmas Holidays and Memorial Day.
- **Purchases are final for all private lessons** and there is no refund after the series has started. All private lesson appointments are subject to our 24 hour cancellation policy.
- We reserve the right to display any team and/or individual photographs.

As the parents or legal guardian(s) of _____, we hereby give permission for our child to participate in dance training and dance classes (the "Programs") at Dance Fever, Inc., at its usual place of business at 200 Wells Ave, Newton, MA, and any and all other locations provided by Dance Fever, Inc. for its programs. We understand that dance training and classes are associated with physical exercises, jumping, rotation of the body, limbs, and head, stretching, and the like, and that there are risks involved as a result thereof.

On behalf of our child and on our own behalf, we indemnify and hold harmless, and waive all claims against Dance Fever, Inc., its principals, agents, servants, and employees from and against any and all loss, cost, charge, claim, demand, liability, damage, medical expenses, long or short term care, claims for emotional distress, suit or demand, known or unknown, apparent and not apparent, present and future, arising directly or indirectly from any personal injury or property damage loss, including, but not limited to partial or total disability, paralysis, or death which may occur to my child while on the premises of Dance Fever Inc. or any other location provided by Dance Fever, Inc. and/or under instruction, supervision, or control of Dance Fever, Inc.

We have read, understand, and agree to all of the above-stated terms (please check).

Parent/Guardian Signature

Please print

Date