

Gainesville Dance Center

Date of Registration: _____

Student Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Guardian(s): _____

Home Phone: _____ Work(Mom) _____ Work(Dad) _____

Birthdate: _____ Age: _____

E-MAIL ADDRESS: _____

Emergency Contact: _____ Phone: _____

Previous Dance Experience: _____

Where did you hear about Gainesville Dance Center (G.D.C.): _____

Name of Housing Development: _____

School you attend: _____ Grade as of September: _____

Class Number: _____ Type Of Class: _____ Day: _____

Times: _____

PLEASE MAKE CHECKS PAYABLE TO "G.D.C."

FOR OFFICE USE ONLY:

TOTAL # OF HOURS: _____

AMOUNT OF TUITION: _____

REGISTRATION FEE: _____

TOTAL DUE: _____

PAYMENT (AMT&TYPE) _____

REGISTRAR NAME: _____

IN COMPUDANCE: _____

DATE FILE MADE: _____

ROLL BOOK: _____

MAILING LIST: _____

E-MAIL ON COMPUTER: _____

Registration will not be accepted until all information is completed.

PLEASE READ & SIGN ON BACK→OVER→

Student name: _____

Conditions of Enrollment & Responsibility

1. I understand and accept the tuition payment schedule and understand that a \$30.00 late fee will be charged after the stated due date.
2. I understand that a returned check fee of \$40.00 will be charges for every returned check, regardless of reason.
3. I understand that "Gainesville Dance Center" and/or "G.D.C. Dance Company", will not be responsible for lost or stolen articles of any kind.
4. I give Gainesville Dance Center permission to use any and all photos, Videos, DVD for advertising promotions that have my child(ren)/myself image included in it.
5. I understand and accept that dance instruction may require an instructor to physically touch a student during class.
6. I understand that all instructors will follow safety procedures. In the event of injury every effort will be made to contact the parent or guardian of the student. If necessary, I authorize the studio staff to administer first aid and/or request emergency medical treatment.
7. I acknowledge that the above named student is physically capable of participating in dance training.
8. I understand that "Gainesville Dance Center" Staff, Instructors, Director and/or their landlords are not responsible for injury to myself or my child, be it based on allegations or not, in any way, by any reason of my or my childs participation in dance class, rehearsals, performances and related events.
9. I have received a copy of the studio handbook/Company guidelines and accept all rules and standards listed therein.
10. I understand that tuition will not be pro-rated due to canceled classes because of inclement weather, holidays, end of season pictures, rehearsals, performance. No refunds or prorating of tuition. Please read carefully our Make Up policy located in Handbook!.
11. I understand that I must give a 2 week written notice if my child will not be continuing dance classes. This is only fair for students on the Waiting List and the studio.
12. There are NO REFUNDS of tuition, costume deposits or any other monies paid to G.D.C.
13. I understand that the participation in the annual recital is optional, and will require costumes and recital fees as stated in the studio handbook.
14. RECITAL: I have read all the recital information and agree to follow the recital rules. I understand that the recital is OPTIONAL and if I choose not to participate, session 4 is my last session for the season.
15. I have read, accept, and understand the conditions of this statement.

STUDENT NAME: _____
PLEASE PRINT NAME

Signature of Student or Parent
(Must have parent signature for any student under the age of 18)

Date