

Contempo School of Dance, Inc. - Registration form

Student name (last) _____ (first) _____ female or male

current age: _____ date of birth _____

Mother's name (last) _____ (first) _____

Address _____

city _____ zip _____

Home phone (____) _____ cell phone (____) _____

Employer _____ Work phone () _____ ext. _____

____ It is o.k. to call me at work or ____ Please call my work only in case of emergency

Father's name (last) _____ (first) _____

Address (if different than above) _____

Phone: (if different than above) _____ cell : _____

Employer _____ Work Phone() _____

Family e-mail address: _____ (for schedules and notices-always kept private)

How informed: (circle) Instructor Friend _____ Ad Phone book Drove by

Any medical conditions that we should know about? _____

Please read and initial the following:

____ Dancers will follow the dress code including proper leotard/tights and hair up for every class.

____ Parents must call the studio if they will be more than 5 minutes late picking up a student after class.

____ In the waiting area or outside, students and siblings must be supervised by the parent at all times.

____ Children may not run, use loud voices, bring loud toys or toys on wheels in the waiting area or in the studios.

____ No smoking or chewing gum allowed anywhere on the premises.

____ Dancers and parents may not leave drink containers and other garbage inside or outside of the studio.

____ Dancers will not wear necklaces, bracelets, watches, or hoop/dangling earrings in class.

____ For our teen students- boyfriends may not wait in the lobby during class.

Release:

I am applying to take a course of instruction in dance or acrobatics at Contempo School of Dance, Inc. I recognize that in any dance/acrobatics program there will be a risk of injury. I understand that such a risk is inherent in the type of physical activity entailed in this instruction. With full knowledge of this risk, I agree to assume all such risks and to hold Contempo School of Dance, Inc. and its director and its employees harmless and to indemnify Contempo School of Dance, Inc. with respect to any claim of injury to myself, to my children, or charges, or to my property arising out of the course of instruction, or to my practice or performance of the course of instruction, whether on or off the premises of Contempo School of Dance, Inc. To my knowledge there is no medical reason why this student should not participate in this program. I agree that my child's photograph may appear on the Contempo website or for advertising purposes.

I have read and understand the studio policies, and I guarantee the attendance of the student and the payment of the monthly tuition as due, including the assessment of late fees, unless I personally notify the studio in writing one month in advance of withdrawal. I understand that until I notify the receptionist (not the teacher) of withdrawal from a class, a place in the class will be held for me or my child regardless of absences, and I am responsible for tuition until I give the written notice. I understand that there are no refunds.

_____(signature of parent or guardian) _____(date)