



Christian Dance Center

"Reaching Souls Through Dance"

Registration Form

Student Information



New Student Returning Student

If you have more than one family member registered, please check here

Dancer _____ Age _____
 Street Address _____ Apt. # _____
 City _____ State _____ Zip Code _____
 Home # _____ Cell # _____ Work # _____
 Date of Birth _____ Email _____
 Church Home _____
 Referred by _____

Contact Information

Parent or Guardian _____
 () Same As Above
 Street Address _____ Apt # _____
 City _____ State _____ Zip Code _____
 Home # _____ Cell # _____ Work # _____
 Email _____
 Emergency Contact _____ Phone # _____

PLEASE CAREFULLY READ AND SIGN THE NEXT PAGE.

Thank you for choosing Christian Dance Center. Please be committed to the choice you have made. Without commitment, Christian Dance Center cannot meet its goals. Please keep the following concerns in mind and if agreed upon, sign below. Thank you in advance for your cooperation.

Tardiness and Absenteeism

Give prior notification to instructors for tardiness and absentees. Because they only have one class a week, each student should be in class, on time, consistently. Please be mindful that tardiness is very disruptive to the other students in the class. Students will not be allowed to participate in class if they are more than 10 minutes late. The student will be asked to watch. This is for your safety. The first 15-20 minutes of any class is warm-up: if you do not warm the muscles up and stretch sufficiently, you can injure yourself.

Behavior

If a student is misbehaving and not adhering to the rules and regulations of the class, they will first be reprimanded with the guardian's notification. If it occurs again, the student will be asked to sit down for the remainder of class. If there is a third offence, the student will be removed from the class with no refund of class fees.

Health Awareness

At your discretion, please note here any physical, developmental, or emotional conditions your child(ren) may have that would hinder participation on a consistent basis. This information is confidential and will be shared only with relevant staff and/or teachers.

Please read carefully, initial the statement, and sign below.

_____ I attest that I have read the class policy regarding tardiness, absenteeism, behavior, and health awareness. I agree to the terms stated.

_____ I hereby understand the risk of injury associated with dance class and performances. I accept full responsibility by obtaining insurance to cover my child in the event of personal injury. In the event of injury and I cannot be reached, I authorize instructors to seek medical attention according to their judgment and agree to be responsible for all expenses. I attest that my child does not have any medical or physical conditions that will affect their well being in dance class or performances.

_____ I understand that payment is due upon registration. I hereby agree to pay on time any and all fees associated with full participation in the programs associated with Christian Dance Center. Refunds and credit for classes will be given no later than two weeks after the start date. I understand that there is a \$15 late charge that will be applied after the due date for tuition. I also understand that there is a \$20 return check fee.

Print Name _____

Signature _____ Date _____

FOR OFFICE USE ONLY

Class	Jan 20	Mar 2	Apr 27		Recital Fee	Costumes	Ads
Dance Exploration \$60							
Kinderdance \$60							
Ballet \$60							
Tap \$60							
Jazz \$40/\$60							
Gospel \$40/\$60							
Hip Hop \$60							
Unlimited \$200							
Annual Reg. Fee \$25							
Total					\$40 (5-15)		
Late Fee \$15							
Paid							
Due							
Date							

Notes: _____

