



THE DANCING CENTER UNLIMITED

Registration Form

313 Littleton Road, Unit 20, Chelmsford, MA 01824

978- 452-9112

Director: Christine Belanger

Date: ____/____/____ Student's Age: ____ Birthdate ____/____/____

Student Name: First _____ Last _____

Mother Name: First _____ Last _____

Student Address _____

City _____ State _____ Zip _____

Student Home (____)____-____ Student Cell (____)____-____

Parent's Cell (____)____-____ Work Number(____)____-____

Email _____

Please check if you would like to receive emails as well as memos

Bills Sent to: ____Mother ____Father____ Other _____

Billing Address _____

City _____ State _____ Zip _____

Duplicate Notices to: ____Mother ____Father ____ Other _____

Address _____

City _____ State _____ Zip _____

Public/Private School Attending: _____

Please fill out Emergency information on the Reverse Side of this form!

Waiver of Release:

I am fully aware of and appreciate the risk of injury associated with participation in a dance event. I further agree that Dancing Center Unlimited along with the employees, agents, officers and directors shall not be liable for any losses or damages occurring as a result of my child's participation in this event.

Date: _____ Signature of Parent or Guardian _____

OFFICE USE ONLY

Class 1 _____ Day _____ Time _____ to _____

Class 2 _____ Day _____ Time _____ to _____

Class 3 _____ Day _____ Time _____ to _____

Class 4 _____ Day _____ Time _____ to _____

Reg. Fee _____ Check # _____ Cash _____ Receipt # _____

Tuition = \$ _____ Check # _____ Cash _____ Receipt # _____

Taken By: _____



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Emergency Information

Emergency Contact #1 : _____

Relation to Student: _____

Home Phone #: _____ Work Phone #: _____

Cell Phone #: _____ Beeper #: _____

Emergency Contact #2 : _____

Relation to Student: _____

Home Phone #: _____ Work Phone #: _____

Cell Phone #: _____ Beeper #: _____

Physician: _____ Phone #: _____

General Info About Student: _____

Medications Student Is Taking: _____

Special Diet/Allergies: _____



Financial Agreement
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I agree to pay the DCU for all fees and charges incurred during this dance year (Recreational Students – September through June; Competitive Students – September through the next 15 months).

In the event my child is unable to participate in classes, recital performances or competitions due to illness, injury or the child's/parent-guardian's decision to terminate, I understand that I am still responsible for the following fees:

Yearly Tuition (Recreational and Competitive Students): Payment of tuition is required for the time the student has spent in studio only. If the child leaves before the recital, you are responsible for the actual time spent in studio/lessons.

Recital Costumes (Recreational and Competitive Students): If a child leaves after costumes have been ordered the parent/guardian is responsible for full payment of costume. In the event the costume can be returned for a "return fee", the parent/guardian will be responsible for the payment of this fee in full

Competition fees (Competitive Students): All competition fees are prepaid by the studio. If a student is pulled from competition by the parent/guardian after the competition fee has been paid by the studio the parent/guardian is still responsible for payment of fee in full. A child missing for injury or illness, will be handled on a case by case basis.

Rehearsal and Workshop Fees (Competitive Students): In order to effectively prepare for these in advance, the Studio must prepay for teacher time and any materials used. Students are responsible for all Rehearsal and Workshop fees that they previously were assigned or signed up for in advance.

Parent/Guardian

Date

Photograph Permission:

I understand that my dancer's picture (candid or professional) may be used for promotional material (i.e. brochures, newspaper articles/advertisements, achievement awards, etc.) by The Dancing Center Unlimited.

My signature below gives my permission, should my dancer's photograph be selected for use.

Parent/Guardian

Date



Tuition Agreement
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TUITION POLICY

The Dancing Center Unlimited (DCU) annual tuition for the dance school year is as follows:

_____ \$_____
Name of dancer Total tuition

The DCU annual tuition is broken into _____ installments for your convenience. Tuition is due on the **5th** of each month. If your payment is not received by the **15th** of the month, you will be charged a \$20.00 late fee, which will be applied, to your account.

ATTENDANCE POLICY (Recreational):

Attendance is required for all scheduled classes. If your child is going to be absent for any reason, please notify the studio with a courtesy call.

If your child is absent, the DCU offers make-up classes. Your child may make up a class with another class at your child's level.

My signature below signifies that I have read and understand the above DCU tuition and attendance policies.

Signature

Date

If you would like a copy of this form, please let the secretary know and she will provide you with one.