

Registration Form 2019

STUDENT INFORMATION

Student's Name: _____

Date of Birth: _____

School: _____

Grade: _____

Home Address: _____

PARENT/GUARDIAN 1

Name: _____ Relationship to Child: _____

Cell Phone: _____ Work Phone: _____

E-Mail: _____ Occupation: _____

PARENT/GUARDIAN 2

Name: _____ Relationship to Child: _____

Cell Phone: _____ Work Phone: _____

E-Mail: _____ Occupation: _____

EMERGENCY CONTACT

Name: _____ Relationship _____

Cell Phone: _____ Work Phone: _____

CLASSES REGISTERED FOR

ALL PERSONS AUTHORIZED TO PICK UP CHILD

1. Name: _____ Relationship to Child: _____ Phone: _____

2. Name: _____ Relationship to Child: _____ Phone: _____

3. Name: _____ Relationship to Child: _____ Phone: _____

HOW DID YOU HEAR ABOUT THE STUDIO?

PREVIOUS DANCE TRAINING (Please list prior dance experience (i.e. number of years, technique studied, teachers, etc.):

PAYMENT INFORMATION

Please note that all classes are payable in advance of each month and should be paid to the studio by the 1st day of each month. We welcome debit orders for ease of payment. Otherwise please make use of EFT. We do not accept cash for safety reasons.

Monthly Tuition Fee: R_____

PERSON RESPONSIBLE FOR PAYMENT:

Name: _____

Signature: _____ Date: _____

Relationship to student: _____

Email address: _____

Banking details

Acc name: Dance Creations

Bank: FNB

Acc number: 62709936457

Branch code: 250655

EMERGENCY INFORMATION

Physician: _____ Hospital Preference: _____

Medical Aid Policy No.: _____

Allergies (food, medicine, etc): _____

Medical conditions: _____

Additional Information/Comments (i.e. blood transfusions, etc): _____

Terms and Conditions of agreement:

This document serves as an agreement between Dance Creations Studio and

1. This agreement shall be deemed valid from _____ and will remain valid until the end of November 2019.

2. Either party reserves the right to cancel this agreement providing written a notice of 20 days. It is understood that all fees need to be paid up to the date of agreed termination.
3. Payment has to be made to Dance Creations before the first day of each month and in advance of classes to be taken for each specific month. A penalty fee of R50 per week will apply in the case of late payment.
4. Dance Creations reserves the right to refuse participation to students with unpaid accounts. Please note that missed classes are non refundable.
5. An increase in tuition fees is subject on an annual basis (notification will be given at the end of the year for the following year)
6. Class fees are calculated based on the active weeks within the year divided by the months of the year. Therefore, payment for each month will remain the same throughout the year, regardless of school holidays when the studio will be closed.
7. Indicated in the space under "Emergency Information" are any health problems or conditions of which the studio should be aware. The parent/guardian understands that risk of injury is inherent in any physical activity. Although Dance Creations and their teachers take every necessary precaution to prevent injuries to students, the parent/guardian/student for themselves, their heirs, administrators, and executors, hereby waive and release Cheri Bjornstad individually and Dance Creations and its staff from any and all claims or damages of any kind arising out of their student's participation in the exercise and/or dance program of Dance Creations. The parent/guardian further certifies that the student is in proper physical condition to participate in the exercise/dance program. The parent/guardian hereby authorizes Cheri Bjornstad or her designated agents (being teachers or administrators employed by Dance Creations) to obtain medical treatment in emergency situations where their (the student's) next of kin cannot be reached in time to authorize the treating physician to provide such emergency medical services. The parent/guardian understands that he/she is responsible for any medical expenses and that the absence of medical aid does not make Dance Creations or Cheri Bjornstad responsible for payment.
8. In the event that a student is ill or have a severe injury, it is advisable for the student to rest and not to participate in strenuous physical activity. Dance Creations reserves the right to refuse any student to participate in a class should it be deemed necessary.
9. Students of Dance Creations are to represent the studio in a positive and respectful manner at all times including, but not limited to; competitions, examinations and performances.
10. Students and persons making use of studio facilities are to respect and use the studio property with care, including but not limited to the mirrors, flooring, barres, furniture and equipment.
11. Dance Creations reserves the right to make use of photography and / video footage of students and participants of events for promotional purposes.
12. Every student attending a dance class is to wear proper dance attire or specified uniform. No loose clothes, jeans, or bulky jewelry will be allowed.
13. The studio will be closed during school holidays (according to public school terms) and public holidays.
14. In the event that a student should have an issue or concern regarding Dance Creations studio's staff or fellow students or parents, the studio management needs to be the first point of contact to resolve any problems in a respectful manner.

Name_____

Signature_____

(for and on behalf of Dance Creations)

Date_____

Name_____

Signature_____

(Parent/Guardian)

Date_____