

Class Assigned \_\_\_\_\_ (Jan will fill in)  
Class Assigned \_\_\_\_\_ (Jan will fill in)

Amount Paid \_\_\_\_\_ Date Paid \_\_\_\_\_  
Check # \_\_\_\_\_ or Cash Receipt # \_\_\_\_\_



## Registration Form--Non-Competition and Pre-Comp Classes 2021-2022

Student One

Student Two

Name: \_\_\_\_\_

\_\_\_\_\_

Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

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Class Desired: Class # \_\_\_\_\_ Description \_\_\_\_\_

Class # \_\_\_\_\_ Description \_\_\_\_\_

Class Time/Day: 1<sup>st</sup> Choice \_\_\_\_\_

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

Medical Problems: \_\_\_\_\_

\_\_\_\_\_

Type of Previous experience \_\_\_\_\_

\_\_\_\_\_

Former dance studio/# yrs attended \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_

I hereby consent that all photographs and video taken and presented by this studio may be used for the purpose of display, advertising or publication in any manner. I further agree that the photographs/images submitted by the undersigned may be reproduced without additional compensation to the undersigned or their representatives. I also declare that I have legal authority to grant these permissions, and I accept all the responsibilities for such. Authorized signature of subject (must be of legal age, 18, or older) or signature of parent or guardian for minors.

Signature of Parent \_\_\_\_\_

**Please provide name and contact information for BOTH parents/guardians.**

Parents' Names: \_\_\_\_\_ \* \_\_\_\_\_ Check if contact info has changed

Parent 1 Address, City, State, Zip \_\_\_\_\_

Parent 2 Address, City, State, Zip (if different) \_\_\_\_\_

Parent 1 Phone: Home: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Parent 2 Phone: Home: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Parent 1 Email: \_\_\_\_\_ Parent 2 Email: \_\_\_\_\_

Would parent(s) be interested in sewing (and/or) altering costumes? Yes \_\_\_\_\_ No \_\_\_\_\_

Payment Calculation:	Monthly Tuition 1 <sup>st</sup> class	\$ _____ (see cost under class descriptions)
	Monthly Tuition 2 <sup>nd</sup> class	\$ _____ \$44/month for most classes
	Monthly Tuition 3 <sup>rd</sup> class	\$ _____ \$36/month for toddler/adult
<b>Classes begin on September 13</b>	Annual Registration Fee	\$ _____ (\$15.00 1st child/ \$25 max per family)
	*Less applicable discounts	\$ _____ (Family Max Tuition is \$130 / month)
	Total tuition enclosed	\$ _____

**If you did NOT already complete a COVID-19 waiver over the summer, sign and submit it with your registration.**

**Second Class Discount:** If registering more than one student in one family, pay full amount for the first student and take off \$2 for each additional student. If one student is registered for more than one class, pay full amount for first class and take off \$2 for each additional class. **\*Family Maximum Discount:** The Family Maximum Fee is \$130. Adult Clogging is not included in the family rate.

**NO REFUNDS ARE GIVEN AFTER THE FIRST CLASS. IF A CLASS IS MISSED, IT CAN BE MADE UP IN A SIMILAR CLASS, BUT NO REFUNDS OR CREDIT ON A LATER CLASS WILL BE GIVEN.**

Mail registration forms and fee to: Jan Tripp, 11775 Lehigh Avenue, Hastings, MN 55033