



# alius dance school

## 2017 Summer Dance Registration Form

Student's Name: \_\_\_\_\_  Male  Female

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Primary Contact Phone: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Mother's Cell Phone: \_\_\_\_\_ Father's Cell Phone: \_\_\_\_\_

Medical Issues (please list injuries, allergies, medications, etc. if applicable):  
\_\_\_\_\_

### **Select program for enrollment:**

**July 2017 evening classes:** Summer registration, \$20, Monthly tuition: \_\_\_\_\_ Class(es) \_\_\_\_\_

#### **Summer Dance Intensive Int. & Adv. Dancers (Pointe Level)**

- July 17-21, 9:00 am-3:00 pm
- July 24-28, 9:00 am-3:00 pm
- Cost:  \$150/week
- \$50 ext day/week
- \$45/daily rate \_\_\_# days

#### **Youth Summer Dance Camp Ages 8 & up (Beg/Int. Level)**

- June 26-30, 9:00 am-3:00 pm
- July 10-14, 9:00 am-3:00 pm
- Cost:  \$150/week
- \$50 ext day/week
- \$45/daily rate \_\_\_# days

#### **Tiny Dancers Summer Camp Beginner Dancers, Ages 4-7**

- June 26-30, 8:30 am-12:30 pm
- Cost:  \$125/week
- \$30/daily rate \_\_\_# days

### **POLICIES:**

- RSVP is required. No drop-ins.
- All events are subject to cancellation, pending enrollment. Please call or email for confirmation.
- All classes are subject to change.
- Instructors are subject to change without notice.
- \$50 deposit is due with your camp/intensive registration form and will be credited toward total fees due. For monthly evening classes, summer registration fee of \$20 and monthly tuition is due at time of registration.
- All fees must be paid in full by the Friday prior to commencement of the session.
- All paid fees are non-refundable after the Friday prior to commencement of the session and after the session has begun. No credit will be given for missed classes or days within the week registered.

### **PAYMENT:**

- Enclosed is my check or money order made payable to Alius Dance School. There is a \$25 charge for returned checks.
- Tuition in Full  \$50 Non-refundable deposit
- Please charge my account:
- American Express  Discover  MasterCard  VISA

Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_ Zip Code: \_\_\_\_\_ CSV: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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## **PARTICIPATION AGREEMENT:**

I acknowledge that due to the nature of dance classes, neither Alius Dance School nor any of its officers, students, faculty, staff or independent contractors will be held accountable for any injury that might occur while in the Alius Dance School facility or any facility used for rehearsals or performances, whether it be caused by accident, or negligence, by any party aforementioned; and I further waive and release Alius Dance School, its officers, faculty, staff and independent contractors from any claims arising from such injuries as well as from any actions taken in seeking medical attention in the manner detailed below. I understand that my child/I will dance at its/mine own risk.

I also hereby authorize, in the event of illness or accident, medical care without delay, which in the judgment of Alius Dance School, its officers, faculty, staff or independent contractors, is dictated by circumstances and/or recommended by medical personnel. I also grant authorization to any emergency room facility to administer necessary medical care in the event of an accident or illness requiring such care while I/my child is engaged in Alius Dance School activities. I further understand that I am responsible for any and all expenses resulting from the foregoing emergency treatment and/or doctor's care and that the Alius Dance School, its officers, faculty, staff and independent contractors will be indemnified and held harmless by the undersigned for such expenses.

In consideration of mine or my child's participation in Alius Dance School, I hereby authorize the videotaping, photography, and recording of the dancer listed below, and/or release of my/his/her name and achievements for educational, promotional, and other purposes deemed appropriate by officers of Alius Dance School. I also authorize the use of the videotape/photography and other information regarding myself/my child in printed matter or other media for presentations by Alius Dance School without my further consent. I hereby agree that such media information shall be the sole property of the Alius Dance School.

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_