***Patsy’s* Dance Studio**

**2020-2021 Registration Form**

**Registration fee is $20 per family**

**1.Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age \_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2.Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age \_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3.Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age \_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Day/Class time preferred for each child: 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,**

**2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent’s Name & address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Cell No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Emergency Contact No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHOTOGRAPHIC RELEASE: I give permission for photos of my child to be taken during dance classes. Photos will be used on social media and for advertisements. \_\_\_\_\_yes \_\_\_\_\_no**

 **\_\_**

**PAYMENT OPTIONS: /\_\_/ I will pay monthly payments and I understand that monthly payments are due first class of the month & no later than 15th of the month to avoid a $10 late fee per month until paid in full. Classes can also be paid bi-yearly with a 5% discount or yearly with a 10% discount if pay for year. /\_\_/ I will pay the costume deposit of $100 (2 costumes) or $150 (3 or more costumes) by November 1, 2020. Balance will be due by February 1, 2021.**

**RELEASE OF LIABILITY: I, the undersigned, recognizing that classes involving physical activity may result in personal injury, do release Patsy’s Dance Studio & her staff from ALL liability. In the case of emergency, if I or my emergency cannot be reached, I authorize Patsy or her staff to secure medical assistance. I have taken the necessary steps in obtaining accidental, health, or hospitalization insurance that would cover any sustained injury.**

**---Parent is responsible for the safe/timely drop-off & pick up of child at the back door. No parents or siblings are to be in dance studio during class time.**

**---Put dancer’s name on all shoes & articles of clothing, please.**

**I HAVE READ, UNDERSTAND AND AGREE WITH ALL THE ABOVE.**

**SIGNATURE OF PARENT/LEGAL GUARDIAN OR ADULT STUDENT**

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**OFFICE USE ONLY**

**Monthly fee(s) $ \_\_\_\_\_\_\_\_, $ \_\_\_\_\_\_\_, $ \_\_\_\_\_\_\_ TOTAL $ \_\_\_\_\_\_\_\_**

**Paid registration fee $20.00 per family Yes \_\_\_\_ No \_\_\_\_**

**Paid bi-yearly $ \_\_\_\_\_\_\_ Paid yearly $ \_\_\_\_\_\_\_**

**Amount paid $ \_\_\_\_\_Check No. \_\_ Cash \_\_ Credit card \_\_PayPal \_\_**