



Registration Form

Student Information

Name _____

Email _____

Cell Phone _____

Date of Birth/ Age _____

Guardian #1 Information

Name _____

Email _____

Home/Cell Phone _____

Address _____

City _____ Zip _____

Guardian #2 Information

Name _____

Email _____

Home/Cell Phone _____

Address _____

City _____ Zip _____

Terms and Conditions

- In attending Stephanie's Academy of Dance, Inc., taking dance, acrobatics, and pilates classes and otherwise using the studio and fixtures therein, I understand that I do so at my own risk.
- Stephanie's Academy of Dance, Inc. shall not be liable for any damages arising from personal injuries incurred by me in, on or about the premises of Stephanie's Academy of Dance, Inc. relative to my attendance at the studio, taking dance, acrobatics, and pilates classes or otherwise using the studio and fixtures therein.
- I assume full responsibility for any injuries or damages which may occur to me in, on or about the premises of Stephanie's Academy of Dance, Inc., and I do hereby fully and forever release and discharge Stephanie's Academy of Dance, Inc., it's directors, instructors, employees from any and all claims, demands, rights of action or causes of said Stephanie's Academy of Dance, Inc., classes, studio, and fixtures thereof.

Tuition Payment Terms

- Tuition is Non-Refundable regardless of cause.
- Rates based on a 8-week term.
- Prices subject to change without notice.
- \$40.00 Fee for NSF Checks
- \$25.00 late fee will be applied the second week of the term if tuition is not paid.

I have read the above terms of this agreement, understand same and agree to be each and every item.

Parent Signature _____

Date _____

Stephanie's Academy of Dance, Inc., **DOES NOT** have my permission to put any picture on the website of my child or myself.

Please register for classes on back side.

