

Let's Dance Studio Registration form 2021-2022
36 Main Street, Chelmsford, ON P0M 1L0 - 705-688-6065
www.letsdancestars.com

Student's Name (First & Last): _____ **Date of Birth** _____
Mailing Address: _____ **City/Town Province** _____ **Postal**
code _____ **Email - address** _____ **Home Telephone #:** _____

Mother's Name: _____ **Mother Cell #:** _____

Father's Name: _____ **Father cell #:** _____

Name of Responsible Party (if not a parent) _____ **Health Card #** _____

Please advise us of any medical conditions that may affect the student's participation: _____

Dance Classes Registering for

Ballet ___ **Jazz/Tap** ___ **Acting/Musical Theatre** ___ **Hip-Hop** ___ **Acro** ___ **Pre- Dance** ___ **MMM** ___ **Contemp** ___

Competitive Groups are by invitation/Audition Only- * Mandatory Ballet and 1 *Technique class *Comp. jazz ___ *Comp Ballet ___ Comp -Contemporary ___ Competitive Lyrical ___ Comp MT ___ Comp Hip-Hop ___ *(Ballet must be taken for all competitive styles except hip-hop)

Cost per class is \$50.00 per 45 min. \$55 per 1 hour class, First class pays full price, 2nd class \$375, 3rd class \$325 etc.

A discount will be given for multiple classes. A %10 family discount is available for families with 2 or more children. All solos and duets (by invitation only)

(All tuition must be paid in full before solo or duets will be given out to students. Must be competitive level and be taking at least 2 technical classes.)

Solos - \$25.00 per 1/2 hr - Duets -\$20 each student per 1/2 hour

There is a non refundable \$100 Competitive Group Registration fee for all competitive students (to be applied toward extra classes, costumes, props etc...) Initials _____

Class Day and Time _____ **Costume deposits** ___ x ___ (\$40 each)= _____ **Tuition Due**
_____ **Total** _____ **paid in Full** _____ **post-dated checks** _____

E- Transfer _____ **Balance Owing** _____

AGREEMENT FOR PARTICIPATION & STUDIO POLICIES

Payments may be made by cash, e-transfer or post-dated checks (dated either the 1st or the 7th of each month) Any payments not received by the 7th will be charged a \$10 late fee, If your child decides to withdrawal from the program you must let us know before the 1st of the next month in order to receive a refund from the next months on. There are no refunds on registration fees or costume deposits. Make-up classes are available pending room and ample notice. If we are forced to close due to dangerous weather, natural disasters ex.COVID - Refunds will not be given as these circumstances are out of our control. Zoom online classes will be offered for long time closures.

*I, understand that dance classes may include, without limitation, dancing with props, stretching, Ballet barre work, across the floor combinations, dance tricks and dance routines in the centre, Acro and other related activities. I, further understand that like any sport, all of the activities of the Studio's classes involve some degree of risk of strain or bodily injury. Let's Dance is not responsible for personal property, or injury that may occur on Let's Dance premises, during class or while practicing. Dancers must wear the proper dance attire for each class with proper shoes. Dancers are not permitted to do any dance or acro tricks while **unsupervised** in the studio. It is the responsibility of the dancer/parents to ensure that these rules are understood and followed.*

****If your child shows any signs of illness, do not bring them to class, she will be sent home due to public health regulations for COVID. All persons entering the studio are asked to please wear a mask and hand sanitize before entering and leaving the studio.***

*I have read the Agreement and Policies section and I adhere to all the content stated therein including: *Studio Policies *Tuition & Payment Information *Dress Code*

Let's Dance has a no bullying policy and has the right to refuse service if studio rules and policies are not followed. I hereby acknowledge that I have read the statements above and agree to participate accordingly. _____ (initial)

Date: _____ **Signature:** _____ **Witness** _____

