A&G Dance Academy Registration Form

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Child's Name	Birth Date				
AgeSchool	Grade	l	Dance Expe	rience (Yea	ırs):
Address:	City/State	!		Z	ip
Parent/Guardian Name:	Phone				
Parent/Guardian Name:	Phone				
Email Address:					
Emergency Contact: (if different than above)					
NameRelationship			Phone		
Auto-Pay Enrollm	ent & Ai	utho	<u> </u>	on	
Tuition is based on a 10-month term from August-June. Tuiti weeks. Tuition is due on the 15th of every month. Late T of each month. If the 15 th falls on a weekend or holiday.	on is the SAME for	or every ur a \$2	month regar 5 fee. AutoPa	dless if the ray will be ch	arged on the 15
NameT	ype (Circle):	Visa	Masterca	ard Ame	x Discover
Card #	Exp. Date	/_		CVV	
Billing Address:	City		_State	Zip	1
I authorize A&G Dance Academy to initiate electronic payments on the 15th of every month for the full amount of tuition OR balance outstanding on my account. I understand that I will NOT receive invoices for monthly tuition and that I will be automatically charged for each transaction. I understand that proof of payment will appear on my account and that I will NOT receive monthly receipts for these automatic payments without a written request. I understand that this authority remains in effect unless written notice of termination is received PRIOR to the 15th. I understand that the payment amounts may vary as classes are added/dropped and as other charges/payments are applied to my account. I acknowledge that tuition is due on the first business day prior to the 15th if the 15th falls on a weekend or holiday and agree to those charges. If for whatever reason, payments cannot be processed to your payment information on-file and your account balance remains overdue, your enrollment in classes will be cancelled. NEW THIS YEAR! Auto Pay Tuition will incur a non-negotiable, non-refundable, monthly \$2.50 service charge. Please note that beginning August 2021, that all future CREDIT/DEBIT TRANSACTIONS will incur this \$2.50 service charge. We will continue to take payments via Cash or Check at no charge. Date					
Annual Registration Fee &	Month!	v Tı			mont
Registration Fees are due upon class registra Registration Fee: \$45 each of	tion each year a	ınd is ef	fective from	ı August-Jı	
I acknowledge that I am enrolling for a 10-month dance year (August throu enrollment. I understand that the registration fee and monthly tuition is class by class basis and that I will NOT receive credits or refunds for any statements and that tuition is due by the 15 th of every month. I reserve the days in advance, PRIOR to the 15 th of the month. I acknowledge that a \$25 Funds" Fee for any returned checks. By signing below, I confirm that I have policies and g	non-refundable and missed or cancelled coneright to discontinu 5.00 fee will be asses	will not be classes. I u ie my payr ssed for la	e prorated. I und inderstand I will ment obligation te payments and	derstand tuition I not receive many By provided Valued I will incur a	on is NOT paid on a nonthly invoices or NRITTEN NOTICE 3 \$35.00 "Insufficier

Parent/Guardian Signature __

Dancer's Class Schedule Please list out ALL enrolled classes below. If taking unlimited classes, please indicate which class level.

Class	Day	Time
		1

Tuition Rates & Fees

Check Applicable Tuition Rate:

Class	Tuition
Length	Rate
30 Min Class	\$45
45 Min Class	\$50
60 Min Class	\$60
90 Min Class	\$90

✓	Number of Classes	Rate
	1 st Class	\$60
	2 nd Class	\$115
	3 rd Class	\$165
	4 th Class	\$210
	5 th Class/Unlimited	\$250
	AGDC Member	\$295
	AGDC Ages 4-6 ONLY	\$200
	AGPT Member	\$50

<u> </u>	Ψ/σ	AGDC Ages 4-6 ONLY	\$200		
		AGPT Member	\$50		
	Monthly Tuition Pa	<u>yments</u>			
Monthly Tuition Rate \$ + \$45 Registration Fee (\$40 Sibling)					
+ \$2.50 Monthly Service Charge (Applies for AUTO-PAY ONLY)					
	TOTAL DUE AT REGISTRATION	\$			
	TOTAL MONTHLY TUITION	\$			
Payment Type:		Authorization #			
□ Cash	□ Credit/Debit	\Box Check	#		

A&G Dance Academy, LLC Liability Release & Waiver

All dancers must have a parent/guardian complete this form BEFORE participating in any

classes/rehearsals at A&G Dance Academy.
Dancer's Name:
Waiver of Liability I recognize and understand the risks of physical injury inherent to dance and dance training and I fully assume those risks. I hereby release A&G Dance Academy, its employees and dance teachers from all liability for injuries sustained or illnesses contracted while attending or participating in any dance classes/rehearsals, camps, or performances. I voluntarily release, forever discharge, and agree to hold harmless A&G Dance Academy from any and all claims or demands for damages, loss of services, costs and expenses, injuries, attorney fees, and any other call for reparation from any and all injury to me or my property arising in any way from my participation in dance classes, camps, intensives, workshops, or performances, use of equipment or facilities, and any activities associated with A&G Dance Academy.
Initials:
Personal Property Release I understand and agree that it is my sole responsibility to safeguard my personal property while participating in any activities associated with A&G Dance Academy and I hereby release A&G Dance Academy, its event sponsors, employees, and dance teachers from all liability for loss or damage to my personal property while attending or participating in classes, rehearsals, workshops, or performances
Initials:
Hands-On Instruction Dance education sometimes requires hands-on instruction as well as verbal instruction. Instructors may correct dancers by touching dancer's bodies to better explain, instruct, educate, and correct the dancers. I acknowledge that this is a common standard in dance education, and I approve the use of hands on instruction. I understand that it is my responsibility to communicate clearly with my teacher and/or the director if I do not approve of hands on instruction and acknowledge that by signing below, I give any teachers, directors and staff such consent.
Emergency & Medical Treatment, Costs, & Insurance
I understand that A&G Dance Academy does not assume any responsibility to provide financial assistance in the event of injury or illness, including but not limited to medical, health, or disability insurance or support. I authorize A&G Dance Academy to obtain necessary medical or dental treatment, including first aid, ambulance transport, hospitalization, or such other care necessary in an emergency. If my insurance does not cover emergency treatment that is deemed necessary and sought for me by A&G Dance Academy. I agree to be responsible for and pay for all costs incurred on my behalf. I release and discharge A&G Dance Academy, and any representative or agent, from any claim which may arise on account of any medical/dental treatment, first aid treatment, or service rendered during an emergency. I understand that A&G Dance Academy does not carry or maintain health, medical, dental, or disability insurance coverage for any participant. I agree to take responsibility for full payment of any emergency medical or dental costs regardless of whether I have insurance coverage.
Initials:
Photo Release A&G Dance Academy reserves the right to take photographs and videos during classes, workshops, performances, or other affiliated events for the purposes of marketing, advertising, and/or promoting A&G Dance Academy. By signing below, I grant and convey all rights, title, and interest in any and all photographic images, videos, and recordings including, but not limited to, any royalties, proceeds or other benefits derived from such photographs or recordings. I give full permission to A&G Dance Academy to use any pictures or videos of my child for such advertising and marketing purposes in any format, including but not limited to, prints, digital images, or videos.
Initials:
Covid-19 Release I hereby acknowledge that I am voluntarily assuming full responsibility for all risks of physical injury arising out of active participation in a dance class and acknowledge the contagious nature of COVID-19. I voluntarily assume the risk that I and/or my children may be exposed/infected by COVID-19 by participating and that such exposure/infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 and other contagious diseases/viruses may result from the actions, omissions, or negligence of myself and others, including, but not limited to, employees, independent contractors, other participants and their families. I release A&G Dance Academy, its instructors, independent contractors, and all associates from liability for harm, injury or death pertaining to COVID-19. I agree and give full authority for temperature screenings upon entering the building and agree to abide by all the policies and procedures regarding COVID-19 explained in this Handbook. I understand that there will be NO REFUNDS for Tuition/Fees for non-participation or withdrawal, cancelled classes/events, missed classes, or closures due to weather, sickness, or any issues arising from COVID.
Initials:
Admission of Roleage from Liability

(by Parent/Guardian of "Participant" as a Legal Agent for Minor)

I have read the foregoing Release and Waiver of Liability and acknowledge that the provisions are legally binding and contractual. I acknowledge that I am a parent/guardian having legal custody over the participant listed above and that I have legal authority to execute this release on behalf of the minor. I attest that my initials above indicate my understanding and agreement with the terms described and serve to irrevocably release A&G Dance Academy from the indicated liability. By signing below, I attest that I am legally bound by the terms hereof and agree to all the terms.

Parent/Guardian Signature	Date	