

Registration Form

Summer 2017



KALEIDOSCOPE
DANCE

Please return your completed and signed registration form to the studio with payment

How Did You Hear About Us?	Please choose the most appropriate response		
	<input type="checkbox"/> Returning Student <input type="checkbox"/> Friend (Please list) _____ <input type="checkbox"/> Social Media <input type="checkbox"/> Internet Search <input type="checkbox"/> Drive By <input type="checkbox"/> Community Guide <input type="checkbox"/> School Mailing <input type="checkbox"/> Other (Please specify) _____		
Student	First Name	Last Name	Date of Birth (mm/dd/yy)
	School Name		Grade
	Known Food Allergies		
Parent	Parent 1 - First Name	Last Name	Cell Phone
	Parent 2 - First Name	Last Name	Cell Phone
	Street Address		
	City	State	ZIP Code
	Email		Home Phone
	Class Name	Day / Time	4, 6, 8 or 12 Pack
	1.		
2.			
3.			
Class / Camp Selection	Camp or Specialty Class Name	Day(s) / Week(s)	Time
	1.		
	2.		
	3.		
	Please choose a payment option - \$25 Deposit Due at Registration		
	<input type="checkbox"/> Payment in Full - May 31 <input type="checkbox"/> Monthly Installment - May 31, July 1		
	Debit/Credit Card Type		
<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> American Express <input type="checkbox"/> Discover			
Name as if appears on card			
Card Number		Expiration Date	
Cardholder's Signature			
Payment Options	By signing above, I authorize Kaleidoscope Dance & Movement Center, Inc. to debit my card for tuition, registration fees, costume fees or other charges incurred by and approved by me.		

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Policies and Waiver

Student Name: _____

General Studio Policies

- Photographs and videos are periodically taken of students participating in Kaleidoscope Dance's programs and activities. I am agreeing that any photograph or videotape taken by Kaleidoscope Dance may be used for promotional purposes, including in electronic media, videotape, brochures, fliers, future advertising and other publications without additional prior notice, permission or compensation.
- Payment of Fees: Kaleidoscope Dance offers 2 payment options for tuition. Tuition may be paid, in full, at the time of registration or any time prior to May 31. You may also elect to divide payments into 2, with the first payment due on May 31 and the second payment due on July 1. A valid credit/debit card must be on file in order to choose this option. If registering for summer before May 31, a \$25 non-refundable deposit is all that is required to hold your spot(s).
- Withdrawal from class will result in a refund of any unused tuition, less any non-refundable deposit.
- Returned Checks/Late Fees: A \$25 fee will be assessed for any returned checks. A late fee of \$25 will be assessed if a payment is more than 5 days past due or a credit/debit card consistently declines. This fee will be waived for any credit/debit card transactions that require updated information, i.e. expiration dates, new card number, etc.
- All personal belongings should be labeled. Kaleidoscope Dance is not responsible for lost or stolen personal belongings.
- Parents and other family members are encouraged to observe class through our two-way mirrors. It is the parents' responsibility to supervise their other children while observing class. Parents and ill-behaved children may be asked to step outside if their behavior disrupts class.
- In order to facilitate a positive learning environment, we will ask any disruptive student to either sit down and observe class or they may be asked to leave class. Persistent behavior issues may lead to permanent removal from class.

Missed Classes / Make-Up Classes

- Each student is allowed 1 make up class during the summer. Makeup classes must occur within 3 weeks of an absence. The class may only be made up with prior communication with the studio to find a suitable makeup class. No refund will be given for missed classes.
- We reserve the right to cancel class when the weather conditions are hazardous. Due to the limited time and amount of space, cancelled classes will not be rescheduled or refunded. In the event of inclement weather, please check your email, our website or our Facebook page.

Waivers

I acknowledge that I have discussed with my physician this dance program and the physical and/or emotional illnesses or injuries I or my child have. I recognize and acknowledge that there are certain risks of physical injury to participants in the programs, classes and activities offered by Kaleidoscope Dance & Movement Center, Inc. ("Kaleidoscope Dance") and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward and/or I may sustain as a result of such participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) against Kaleidoscope Dance, including its staff, instructors, officials, officers, directors, volunteers and employees as a result of participation in the classes, programs or activities of Kaleidoscope Dance. I do hereby fully release and forever discharge Kaleidoscope Dance, its staff, instructors, officials, officers, directors, volunteers and employees from any and all claims for injuries, damage or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with or in any way associated with any classes, programs or activities offered by Kaleidoscope Dance. I agree not to hold Kaleidoscope Dance and Movement Center, Inc. or its staff responsible for my child or myself while he/she is not in class.

By signing below, I acknowledge that I have read, understand, and agree to abide by the studio policies as well as all payment terms.

Parent/Guardian

Date

Student (if 18 or older)

Date