

The Magical Movement Dance & Fine Arts Academy

Registration for September 2011 - May 2012

Date: _____

Child's Name _____ Preferred Name _____

Date of Birth ____ / ____ / ____ Age as of September 1, 2011 ____

Class Name	Ages	Day	Time	Alt Day/Time

School Child will attend for the 2011-2012 school year _____ Grade _____

Parent Or Guardian _____

Home Address _____

City _____ State _____ Zip _____

Primary Phone Number _____

2nd Contact Phone - Name: _____ Number: _____

E-mail address - please provide: _____
(we do not share or "spam" our families; email is used for communications such as last-minute closings and information pertinent to your dancer)

Name and phone number of Child's doctor _____

Medications your child takes regularly _____

Medical Conditions instructors should know _____

Summarize previous dance training _____

How did you hear about Magical Movement??? _____

Payments & Fees: I elect to pay (circle one) yearly tuition semester tuition quarterly tuition

Person Responsible for Tuition Payments _____

Registration Info -- office use only	Initial _____	Book Entry _____
Reg Fee Paid _____	Tuition Paid _____	Check# _____ / Cash _____
Credit Card: Type: _____	Number: _____	Exp: ____ / ____ CV# _____

Summary of Studio Policies

Note that Tuition and Costume Fees are non-refundable.

How to make payments

You may elect to use the fee structure most comfortable for you. Payments should be placed in the payment box or mailed to the studio by the posted due dates. You will not receive regular billing statements to remind you of your payments; however, notices will be posted in the studio and on the door reminding you of payment due dates. All payments are made in equal installments regardless of the number of lessons in the month or during the calendar year. ***Please make sure your child's full name and class are on the lower left corner of your check.***

Your cancelled check or bank statement is your receipt. The fee for returned checks is \$30. Cash payments should be made in the exact amount and given directly to the instructor or office manager; DO NOT leave cash without receiving a receipt. Magical Movement accepts VISA, MasterCard, Discover, and American Express credit/debit cards.

There is a \$30 per family registration fee; however, this fee will be waived if you are returning for the following year and register no later than May 21, 2011.

Should you find that you are unable to continue lessons, a two week notice is appreciated and expected whenever possible. You will be considered enrolled and responsible for payments up until Magical Movement receives notice that your child is dropping classes. Refunds are not given for any remaining classes with the exception of injury or a long-distance family move. Full year registration (through the end-of-year recital) is assumed without prior written arrangements.

Recital fees, which include costumes, are due the week prior to Thanksgiving. This fee covers costumes, props and other necessary items for your child's year-end performance. Recital fees are *approximately* \$75 per class per student. (Fees are subject to adjustment after reviewing recital venues, costume catalogs, etc.) Recital fees are non-refundable.

Insurance

Magical Movement does not hold medical insurance on your child. It is strongly recommended that you carry health and medical insurance on your child. In the case of an accident or injury, your insurance will be the only source to cover medical expenses.

I have read and understood all policies outlined above. _____
Parent/Guardian signature

Liability Release

I hereby release The Magical Movement Dance & Fine Arts Academy and/or its assigns of liability during classes or any studio functions.

Parent/Guardian Signature

Printed Name

Date

Photo Release

I hereby grant The Magical Movement Dance & Fine Arts Academy and/or its assigns permission to use photographs periodically in connection with studio activities or advertisements. I understand there will be no compensation for the use of such photographs.

Parent/Guardian Signature

Printed Name

Date