

2023 Early Registration

Mother's Name: _____ Cell Phone: _____ Home Phone: _____

Father's Name: _____ Cell Phone: _____ Home Phone: _____

Email Address: _____

Mailing Address: _____ Street Address: _____

Emergency Contact (if different from above): _____ Phone #: _____

____ I would be willing to be a Class Mom for my child's class. Child: _____ Class: _____

____ I would like to be part of the Parent Board

Child Name: _____ Birthday: mnth / day / year _____ HC #: _____

Health Concerns: _____ Grade as of Sept. 1st: _____ Age as of Sept. 1st: _____

Child Name: _____ Birthday: mnth / day / year _____ HC #: _____

Health Concerns: _____ Grade as of Sept. 1st: _____ Age as of Sept. 1st: _____

Child Name	Class Name, Day, Time	Rate

Sub Total From Above _____

Limit 1 Multi Child Discount

DANCE: 2 children \$40 off, 3 children \$80 off, 4 children \$120 off

(All children must be registered in a dance class)

TUMBLING & ART: 2 children \$10 off, 3 children \$30 off, 4 children \$40 off

Sub Total From Additional Child Sheet _____

Sub Total _____

*Ballet 6/7, Ballet Inter/Adv and Advanced Ballet take place twice a week.

This makes them either a 1 ½ or 2 hour class in the pricing below.

Discount - _____

Class Fee Total _____

*If the same student is taking 2 classes or more, the additional classes are charged the 2nd Class Fee per class.

Turn page over for payment.

DANCE FEES			TUMBLING & ART FEES		1 SESSION	ALL YEAR
					Sept - Dec Jan - March	
45 Min Class	\$350		Mommy & Me Tumbling		\$175	\$250
1 Hour Class	\$400		45 Minute Tumbling		\$200	\$350
Mini/Jr Cheer Varsity Cheer *These classes have additional registration	\$500 \$600		1 Hour Tumbling *Does not apply to Cheer Tumbling classes.		\$225	\$400

requirements.					
2 Hour Class	\$525		1 Hour Art Class	\$225	\$400
2nd Class	\$250				

Class Fee Total (from first page) = _____ **A**

Registration Fee: 1 child = \$20 2 children = \$40 3 or more = \$50 (½ off at Early Registration)
= _____ **B**

Art Supply Fee: 30\$ per session (per child) 55\$ for all year (per child) = _____ **C**

Costume Fees:

3 year olds - Kindergarten \$65 per class 2 = \$130 3 = \$195 4 = \$260 _____

Grade 1 and Up \$75 per class 2 = \$150 3 = \$225 4 = \$300 _____

Costume Fee Total = _____ **D**

Total lines A, B, C, D = _____ **LINE 1**

VOLUNTEER DEPOSIT \$50

This only applies to performing DANCE students. A separate post dated check for April 15th should be written for this fee. The deposit will be refunded or the check will be torn up after the family has volunteered to help at picture day or the year end show.

Volunteer Fee = _____ **LINE 2**

Payment Options

_____ **Option 1: 1 PAYMENT** Pay the total amount (add lines 1 & 2). GST is included in pricing. = _____ **Today's payment**

_____ etransfer to e.trandance@gmail.com _____ check # _____ cash receipt (Must be given directly to Christine)

_____ **Option 2 MONTHLY PAYMENTS** Provide monthly etransfers, monthly post dated checks, or monthly cash payments. First and last month payment must be made at registration. If you only signed up for 1 session of tumbling, it must be paid in full by Dec 1st.

Total LINE 1 (from above) _____ divided by 8 _____ x 2 (first and last month) = _____ **Today's payment**
 ^^^-----LINE 3

_____ etransfer to e.trandance@gmail.com _____ check # = _____ **Volunteer Fee**

October - November - December - January - February - March LINE 3 = _____ **Monthly Payment**

_____ etransfer to e.trandance@gmail.com will be sent on _____ each month or _____ # of checks (date for the 1st or the 15th)

Broadway Dance Parental Release / Agreement

I _____, parent and or guardian of said student(s): _____ have received or will obtain a copy of Dance on Broadway's policies and will take the responsibility to carefully read and follow the rules and policies therein. I understand that Dance on Broadway does not give credit and or refunds for class(es) missed due to holiday, vacation, illness, weather, etc. I further understand that there are specific risks of physical or property damages, losses, or injury that may result from me or my child's participation with Dance on Broadway and I voluntarily assume the risks associated with such participation and do hereby release Dance on Broadway, Employees and Volunteers from any and all liability. I agree to volunteer to help at least once during the year end show or at picture day. If I do not volunteer my volunteer deposit is forfeited. I allow Dance on Broadway, Employees and Volunteers to contact me via text messaging. I grant Dance on Broadway, its representatives and employees the right to take photographs of me, my children listed above, my property in connections with the above

identified subject. I authorize Dance on Broadway, its assigns and transferee to copyright, use and publish the same in print and/or electronically. I give Dance on Broadway permission to pick up my childs costume if necessary from the United States.

Parent/Guardian Signature _____ Date _____

For Office Use Only: _____ Registration is complete w/ email _____ Release form 1 & 2 _____ Volunteer Payment _____ Initial _____ File _____
Notes:

Additional Child Sheet

Child Name: _____ Birthday: mnth / day / year _____ HC #: _____

Health Concerns: _____ Grade as of Sept. 1st: _____ Age as of Sept. 1st: _____

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