



## 2014-2015 REGISTRATION FORM

4156 CLEMMONS RD. CLEMMONS NC 27012

336.778.1121

PRODANCEACADEMYNC@YAHOO.COM

STUDENT'S NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE (AS OF SEPT. 1) \_\_\_\_\_

PARENTS NAME(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PH: \_\_\_\_\_ PARENT'S CELL PH: \_\_\_\_\_

PARENT'S EMAIL ADDRESS: \_\_\_\_\_ HOW DID YOU HEAR ABOUT US: \_\_\_\_\_

EMERGENCY CONTACT (NAME & PHONE) : \_\_\_\_\_

PREVIOUS DANCE EXPERIENCE: \_\_\_\_\_

WHERE: \_\_\_\_\_

### THIS STUDENT IS ENROLLING FOR THE FOLLOWING CLASSES:

Please check all that apply and indicate the day & time of class in space provided.

#### REGULAR CLASSES

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> combo classes _____ | <input type="checkbox"/> clogging _____ | <input type="checkbox"/> gymnastics _____  |
| <input type="checkbox"/> ballet/pointe _____ | <input type="checkbox"/> jazz _____     | <input type="checkbox"/> <i>Broncos Cheer</i> _____                              |
| <input type="checkbox"/> contemporary _____  | <input type="checkbox"/> hip-hop _____  | <input type="checkbox"/> <i>The Academy</i> (competition team; by audition only) |

#### PUNCH CARD CLASSES

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Teen/PC Hip Hop _____ | <input type="checkbox"/> Teen/PC Jazz _____ | <input type="checkbox"/> Clogging PC _____ |
|--|---|--|

**Special Requests/Notes:** \_\_\_\_\_

### FOR OFFICE USE ONLY:

REGISTRATION FEE Amount: \_\_\_\_\_  
 paid  check # \_\_\_\_\_  sibling discount applies  
 cash  
 credit  
Date paid: \_\_\_\_\_

PREFERRED FORM OF TUITION PAYMENT:  check/cash  credit card type \_\_\_\_\_  Please AUTO charge CC

CREDIT CARD # (must provide, regardless of payment method): \_\_\_\_\_ EXP: \_\_\_\_\_ CODE: \_\_\_\_\_

**I understand that:** my registration fee is non-refundable and I must provide a credit card number on file to ensure timely payment of tuition. If I have not paid tuition by the 5th of each month I give PDA permission to charge my credit card with my amount due, plus the late fee of \$10.00. I agree to give PDA 30 days notice of my intent to withdraw from any class. Lack of notice (email/phone) will result in continued responsibility of all fees associated with the class. Costumes must be paid in full for my child to participate in the recital and that in lieu of recital fees, I will be required to purchase recital tickets to attend. JUNE tuition payment is required as part of the dance season. Pro Dance Academy has my permission to use any photos and videos which include the likeness of myself or my child for use on their printed studio materials and website. I agree to abide by all rules, regulations, and policies of the studio. Pro Dance Academy is not responsible for any loss, injury, or theft and I will not hold PDA responsible for any such occurrences.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_