

ANN PARSLEY

SCHOOL OF DANCE

40730 Garfield Road | Clinton Township | 48038 | 586.286.8300 | info@annparsleyschoolofdance.com | www.annparsleyschoolofdance.com

FALL REGISTRATION 2009

NEW STUDENT _____ RETURNING STUDENT _____

HOW DID YOU HEAR ABOUT OUR STUDIO? (PLEASE CIRCLE)

ADVERTISEMENT
 PHONEBOOK
 SAW STUDIO
 FRIEND
 OTHER
 PLEASE LIST: _____

PARENT'S NAME _____

ADDRESS _____

CITY _____

ZIP CODE _____

EMAIL ADDRESS _____

HOME PHONE () _____

MOTHER'S CELL PHONE/WORK () _____

FATHER'S CELL PHONE/WORK () _____

| STUDENT #1 NAME | BIRTHDATE | AGE | SEX | M | F |
|-----------------|-----------|-----|-----|---|------|
| CLASS | DAY | | | | TIME |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| STUDENT #2 NAME | BIRTHDATE | AGE | SEX | M | F |
|-----------------|-----------|-----|-----|---|------|
| CLASS | DAY | | | | TIME |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Additional Classes Attached: YES NO

\$25 REGISTRATION FEE PER FAMILY, \$15 FOR INDIVIDUALS. REGISTRATION FEE IS DUE UPON REGISTRATION. STUDENTS WILL NOT BE ENROLLED IN CLASSES UNTIL REGISTRATION FEE IS PAID FOR IN FULL.

Thanksgiving Break no class Nov 26th – 29th Classes resume Nov 30th

Christmas Break no class Dec 21st – Jan 3rd Classes resume Jan 4th

Dance classes DO NOT have a "mid-winter" break

Spring Break no classes April 2nd – 8th classes resume April 9th

Memorial Day no classes May 31st

Recital – June 19th 1pm and 7pm

Closures due to inclement weather will be announced on our website and telephone voice mail

www.annparsleyschoolofdance.com

REGISTRATION

All students must register before beginning fall classes, which includes completion of the front and back of the registration form and the emergency information form. There is a **\$25 non-refundable** Annual Family Registration Fee, or \$15 individual fee, required at the time of registration. This fee is a separate fee and does not apply towards tuition. Students will not be registered for classes unless fee is paid at the time of registration.

CLASS RECITAL INFORMATION

Classes that are marked with a (T) are not in the recital and are technique only. Classes that are marked with a (R) will participate in the recital. Beginning, adv beginning, pre jazz and hip hop, tap III and Primary I, II and II classes are in one performance for the recital. All other classes are in both performances for the recital.

STUDIO POLICIES

Please read this section carefully, as it contains our billing and make-up policies.

- Tuition is based on a 4-week month. Some months are longer and the extra classes equal those missed during holidays. There is no pro-rated tuition for missed weeks or Holiday Break months.
- Tuition is due by the **first lesson** of the month. It is the parent/guardian's responsibility to make tuition payments to the Office Manager at the front desk.
- Full year payments receive a 10% discount. Monthly statements are not mailed unless accounts are delinquent.
- There are no refunds, credits or transfers of tuition for missed classes or if a student drops in mid-month.
- You may make-up classes during the year with any other class of the same level or lower, even if it is not the same type of dance.
- Payments will be **considered late on the 15th day of the month**. A \$10.00 Late Fee will be added to all accounts that carry a balance each month on any tuition/costume balance. THESE FEES WILL NOT BE WAIVED UNDER ANY CIRCUMSTANCE.
- Classes will be suspended for all accounts that are over 30 days past due.
- A \$30 fee is charged on all returned checks.
- The studio reserves the right to deny students from participating in the recital, without a refund of costume or tuition monies, if absences are extreme and excessive.
- Class days and times are subject to change based upon enrollment.
- Students are to abide by dress code listed below at all times. Students that are not properly dressed will be dismissed from class. Hair should be secured neatly off the faces unless otherwise noted.

ANN PARSLEY SCHOOL OF DANCE DRESS CODE

| | |
|---------------------------------|--|
| Ballet | Girls-Solid colored leotard, pink footed tights, ballet wrap skirts permitted at teacher's discretion, ballet slippers, hair secured neatly off the face for beginners, intermediate and advanced levels must have hair in a bun, no jewelry is permitted. Boys-Black tights, white tshirt, black ballet shoes, dance belt |
| Jazz and Progressions | Solid colored leotard, any color footed tight, dance shorts/capris/skirts are permitted, slip on jazz shoe-color determined by teacher |
| Tap | Solid colored leotard, any color footed tight, dance shorts/capris/skirt are permitted, black flat tap shoe with buckle for beg, adv beg and tap level III, black lace up jazz/tap shoe for tap level IV and up |
| Lyrical and Contemporary | Solid colored leotard, any color footless tight, dance shorts/capris/skirts are permitted, Capezio foot undies or bare feet |
| Hip Hop | Loose fitting dance clothing, tennis shoes with NON-MARKING soles |

I HAVE READ, UNDERSTAND AND AGREE TO ALL OF THE ABOVE LISTED INFORMATION AND POLICIES OF ANN PARSLEY SCHOOL OF DANCE-SIGNATURE REQUIRED

| | |
|-----------|------|
| SIGNATURE | DATE |
|-----------|------|

FOR OFFICE USE ONLY-DO NOT ACCEPT WITH OUT REGISTRATION PAYMENT AND EMERGENCY CONTACT FORM

| | | | |
|--------------------------|---------------------|---------|--------|
| DATE REGISTERED AND PAID | PAYMENT TAKEN BY | | |
| TUITION AMOUNT \$ | REGISTRATION FEE \$ | | |
| TOTAL AMOUNT PAID \$ | | | |
| TYPE OF PAYMENT | CASH | CHECK # | CREDIT |

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EMERGENCY CONTACT 2009

PARENT'S NAME

STUDENT NAME

BIRTHDATE

AGE

SEX M F

ADDRESS

CITY

ZIP CODE

HOME PHONE ()

CELL PHONE/WORK ()

PLEASE LIST TWO EMERGENCY CONTACTS

| NAME | PHONE | RELATION |
|------|-------|----------|
| NAME | PHONE | RELATION |

MEDICAL INFORMATION

| | |
|---------------|-------|
| FAMILY DOCTOR | PHONE |
|---------------|-------|

MEDICATION TAKEN REGULARLY

LIST ANY ALLERGIES

| | |
|---------------------------------|--------------|
| DOES THE CHILD HAVE ASTHMA? Y N | INHALER TYPE |
|---------------------------------|--------------|

LIST PREVIOUS INJURIES THAT COULD BE OF CONCERN IN AN EMERGENCY

INSURANCE INFORMATION

INSURANCE COMPANY NAME

CONTRACT NUMBER

SUBSCRIBER NAME

GROUP NUMBER

SERVICE CODE

RELEASE OF LIABILITY-SIGNATURE REQUIRED

As the legal parent or guardian, I release and hold harmless Ann Parsley School of Dance (APSD) and its owners and operators from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant and/or the undersigned, while in or upon the premises or any premises under the control and supervision of APSD and its owners and operators or in route to or from any of said premises. I also allow APSD to use photos and or videos for any advertising or publications. I have read and agree to follow APSD Studio Policies.

PARENT/GUARDIAN SIGNATURE

DATE

In the event of a serious accident or illness, I request that a representative of the dance studio contact me. If I cannot be reached, I request that contact is made with the physician named and their instructions be followed in the treatment of my child. If the emergency is such that immediate medical care is necessary, I authorize the dance studio to transport my child to the hospital for emergency care. The hospital agents, or a licensed physician, may administer such emergency treatment as they deem necessary under the circumstances.

PARENT/GUARDIAN SIGNATURE

DATE

I do not give my consent for emergency medical treatment of my child. In the event of serious illness or injury requiring emergency treatment, I wish the dance studio to take no action or to: _____

PARENT/GUARDIAN SIGNATURE

DATE