

2017-2018 Registration Form For High School Beginner Dance Sessions *Payment in full must accompany the form and will secure class placement and discounts.*

Date	Mail to: PO Box 1259, Katy, TX 77492 or drop in the payment box located on the front porch of the studio					
Student's Name						
Sessions (check all that you are registering/paying for	or this student at this time):					
Tap - □ 1 (Sept-Oct) □ 2 (Oct-Dec) □ 3 (Jan-Feb) 🛛 4 (Mar-Apr)					
Ballet - □ 1 (Sept-Oct) □ 2 (Oct-Dec) □ 3 (Jan-Feb) 🛛 4 (Mar-Apr)					
Birth Date (mm/dd/yy) & Age						
Grade: 9 10 11 12 Scho	ool					
Physical Limitations (i.e. arthritis, prior injuries, etc) No or	Yes (explain)					
Learning/Comm. Disorders (ADD, Autism, Dyslexia, etc) No	o or Yes (explain)					
Allergies (food or otherwise) No or Yes (explain)						
(optional) What do you hope your teen will learn/accomplish in these classes?						
Parent/Guardian Contact Information:						
	Father's Name					
Mailing Address						
City Zip Code	Subdivision					
Home Phone Number ()	(if no home phone/cell phone only, please leave blank)					
Mother Cell Phone ()						
	Father Work Phone ()					
Add'I emergency contact name and number (optional)						
Email Address(es)						
All reminders and paperwork (including newsletters) will b	be sent <u>via email</u> .					

(continued)

 $\star \star \star$ If someone other than parent/guardian is paying for the student's dance classes, please provide name, address, phone number(s) and email address here:

Parent/Student Studio Agreement Effective September 2017-July 2018

Attendance

I understand it is to my teen's learning advantage that they attend class each week.

I understand that students more than 10 minutes late will not be permitted to enter the class, for their safety and the flow of the class.

Choreography

I understand that any class material and dances taught at En Avant Studio may not be copied or distributed or used for any performances or other businesses' use outside of the studio without the written permission of the director.

Classwear

I understand that classwear requirements (as listed in the brochure) are given to ensure the safety and bestfocused learning environment for all students and that failure to respond to warnings may result in my teen being dropped from the school and no refunds being issued.

Hold Harmless

I agree to release and hold harmless En Avant Studio, its officials, faculty and staff, agents, other employees or volunteers from any actions, suits, damages, claims or judgments that may result from any personal injury that my child, myself or any guest sustains while on the premises of En Avant Studio and at all off-site activities offered to my teen.

I will responsibly supervise (keeping them always in my sight) any younger children I may bring to En Avant Studio.

Safety & Health

I understand that En Avant Studio is a drug, alcohol, tobacco, weapon and profanity-free environment.

Payments

I understand that all payments are non-refundable.

I understand that payment in full is due by the Friday prior to the start of each session.

Photographs/Marketing

I understand that photographs of my teen and/or their class may be taken for the promotion of En Avant Studio. I agree that they may be used for, but are not limited to, brochures, literature, newspaper advertising, website, Facebook, etc, including video marketing. I understand that students' names and personal information will not be published.

Signature Parent/Guardian: Date

(continued)

Psalm 149:3 Let them praise His name with dancing.

En Avant Studio 2017-2018 HS Beginner Dance Registration Form

New students only

Referred By: (circle one)					
Search Engine/Website (Wh		Word of Mouth (Who?)			
Signs/Banners	Freckletown	Groupon		LivingSocial	Facebook
Community Event: Parade	or MD Kids Booth	or Mac K	Kid Booth		
Yellow Pages: Phone Book	or Internet	Other			
Past Dancing Experience (of	ther than En Avant)	No or	Yes	(where, when, what ki	ind, how long?)