

## 2009/2010 REGISTRATION

Please check class you wish to enroll in, circle the level, note name of dancer, and time of the class, and note type of payment included.. Payment may be made by credit card [online or in person], check, or cash. All contracts are for one year, September through May's recital. Each level, beginner, intermediate, and advanced will be offered by age groups: 7-9, 10-13, 14-18, adult. This year's students have received recommendations for next year's classes.



DANCER NAME:		AGE:	
		PREFERRED DAY	PREFERRED TIME
<input type="checkbox"/> Baby Aerial with parent 2-3 yrs <input type="checkbox"/> Baby Aerial with parent 4 yrs	\$30 per month for each section = \$60 bimonthly payment		
<input type="checkbox"/> Combo Ballet/Tap 3-4 yrs	\$45/month = \$90 bimonthly payment		
<input type="checkbox"/> Pre-Aerial 5 -6 yrs	\$70/month = \$140 bimonthly payment		
<input type="checkbox"/> Pre-Ballet 5-6 yrs <input type="checkbox"/> Pre-Jazz 5 -6 yrs <input type="checkbox"/> Pre-Tap 5 -6 yrs <input type="checkbox"/> Lyrical 5 -6 yrs <input type="checkbox"/> Pre-Hip Hop 5 -6 yrs	\$30 per month = \$60 bimonthly payment for each section/discipline		
<input type="checkbox"/> Combo Hip Hop 7-8 yrs <input type="checkbox"/> Combo Lyrical 7-8 yrs	\$45 per month = \$90 bimonthly payment for each section/discipline		
<input type="checkbox"/> Home School Combo Ballet/Lyrical <input type="checkbox"/> Home School Combo Tap/Jazz <input type="checkbox"/> Home School Combo Aerial/Acro	\$45 per month = \$90 bimonthly payment for each section/discipline		
<input type="checkbox"/> Ballet Adult	\$18/cl or \$60/mos = \$120 bimonthly payment		
<input type="checkbox"/> Ballet Beginner, Intermediate, 7-9 yrs <input type="checkbox"/> Ballet Beginner, Intermediate, Adv., 10-13 yrs <input type="checkbox"/> Ballet Beginner, Intermediate, Adv., 14-18 yrs <input type="checkbox"/> Pointe Beginner, Intermediate, 10-13 yrs <input type="checkbox"/> Pointe Beginner, Intermediate, 14-18 yrs	\$60 per month = \$120 bimonthly payment for each section/discipline		
<input type="checkbox"/> Tap Beginner, 7-9 yrs <input type="checkbox"/> Tap Beginner, Intermediate, 10-13 yrs <input type="checkbox"/> Tap Beginner, Intermediate, Adv., 14-18 yrs	\$60 per month = \$120 bimonthly payment for each section/discipline		
<input type="checkbox"/> Tap Adult	\$18/cl or \$60/mos = \$120 bimonthly payment		
<input type="checkbox"/> Modern Beginner, Intermediate, 7-9 yrs <input type="checkbox"/> Modern Beginner, Intermediate, 10-13 yrs <input type="checkbox"/> Modern Beginner, Intermediate, Adv., 14-18 yrs	\$60 per month = \$120 bimonthly payment for each section/discipline		
<input type="checkbox"/> Modern Adult	\$18/cl or \$60/mos = \$120 bimonthly payment		
<input type="checkbox"/> Lyrical Beginner, Intermediate, 7-9 yrs <input type="checkbox"/> Lyrical Beginner, Intermediate, 10-13 yrs <input type="checkbox"/> Lyrical Beginner, Intermediate, Adv., 14-18 yrs	\$60 per month = \$120 bimonthly payment for each section/discipline		
<input type="checkbox"/> Aerial Beginner, Intermediate, 7-9 yrs <input type="checkbox"/> Aerial Beginner, Intermediate, 10-13 yrs <input type="checkbox"/> Aerial Beginner, Intermediate, 14-18 yrs	\$100 per month for each section/discipline = \$200 bimonthly payment		

+ A detailed schedule is available on line at [studiol80dance.com](http://studiol80dance.com).

+ Appropriate level placement will be determined during the first week of class by the teacher.

## 2009/2010 REGISTRATION (cont.)

DANCER NAME:		AGE:	
		PREFERRED DAY	PREFERRED TIME
<input type="checkbox"/> Aerial Adult	\$28/cl or \$100/mos = \$200 bimonthly payment		
<input type="checkbox"/> Aerial Circus Beginner, all ages	\$100 per month = \$200 bimonthly payment		
<input type="checkbox"/> Jazz Beginner, Intermediate 7-9 yrs <input type="checkbox"/> Jazz Beginner, Intermediate 10-13 yrs <input type="checkbox"/> Jazz Beginner, Intermediate 14-18 yrs	\$60 per month = \$120 bimonthly payment for each section/discipline		
<input type="checkbox"/> Jazz/Acro Beginner, 5-12 yrs <input type="checkbox"/> Jazz/Acro Beginner, 12 yrs & older	\$60 per month = \$120 bimonthly payment for each section/discipline		
<input type="checkbox"/> Hip Hop Beginner, Intermediate 7-9 yrs <input type="checkbox"/> Hip Hop Beginner, Intermediate 10-13 yrs <input type="checkbox"/> Hip Hop Beginner, Intermediate 14-18 yrs	\$60 per month = \$120 bimonthly payment for each section/discipline		
<input type="checkbox"/> Hip Hop Adult	\$18/cl or \$60/mos = \$120 bimonthly		
<input type="checkbox"/> Zumbatomic® 4-15 yrs	\$60 per month = \$120 bimonthly		
<input type="checkbox"/> Zumba®	\$18/cl or \$60/mos = \$120 bimonthly payment		
Competition Team classes [audition only] <input type="checkbox"/> Competition Team Jazz <input type="checkbox"/> Competition Team Tap <input type="checkbox"/> Competition Team Ballet <input type="checkbox"/> Competition Team Lyrical <input type="checkbox"/> Competition Team Modern	\$60 per month = \$120 bimonthly payment for each section/discipline		
Solo and Duet [by permission] <input type="checkbox"/> Jazz <input type="checkbox"/> Ballet <input type="checkbox"/> Lyrical <input type="checkbox"/> Tap	\$100/hr./mos = \$200 bimonthly payment for Solo  \$80 each/hr./mos = \$160 bimonthly payment per dancer for duet		
<input type="checkbox"/> Adult 6 week Fitness Challenge	\$450 per 6 week session; [sessions run concurrently throughout the year]		
<input type="checkbox"/> Kid's Ballroom	\$60/mo = \$120 bimonthly		
<input type="checkbox"/> Adult Ballroom 6 week session/one hr./wk.	\$225 per session		
<input type="checkbox"/> Conditioning 60 minutes	\$60 per month = \$120 bimonthly		
<input type="checkbox"/> Technique 60 minutes	\$60 per month = \$120 bimonthly		
<input type="checkbox"/> Advance Technique 90 minutes	\$90 per month = \$180 bimonthly		
<input type="checkbox"/> Adult drop in 10 class card for 60 min classes	\$165		
<input type="checkbox"/> Adult drop in 10 class card for 90 min classes	\$265		
<input type="checkbox"/> Private Lessons / Dance	\$36/hr.		
<input type="checkbox"/> Private Lessons / Aerial	\$56/hr.		
<input type="checkbox"/> Semi-Private Lessons / Dance [2 dancers]	\$70/hr. = \$35/hr. each		
<input type="checkbox"/> Semi-Private Lessons / Aerial [2 dancers]	\$100/hr. = \$50/hr. each		
<input type="checkbox"/> Registration	\$35 per academic year per family		

+ A detailed schedule is available on line at [studio180dance.com](http://studio180dance.com).

+ Appropriate level placement will be determined during the first week of class by the teacher.

# Studio 180 Dance, Inc. Participation Agreement

**Please read this participation agreement form carefully. It is a legal contract containing an image/voice permission, release and waiver of liability, assumption of risk, indemnification and medical emergency permission, and it affects any rights you may have if you are or your child is injured while participating in activities at Studio 180 Dance. If you are under 18 years of age, your parent or legal guardian must sign this agreement also.**

## Activities at Studio 180 Dance:

Activities include dance in any of the dance forms offered including aerial, acro and circus aerial, participation in any of the dance classes, participation in a party at Studio 180 Dance, attendance at any Studio 180 event sponsored at the studio or by the Studio.

## Participation Agreement:

I agree to only participate in activities in which I feel comfortable and that I can accomplish safely. I agree to follow all rules established by the faculty at Studio 180 Dance and further agree to refrain from conduct that creates risk for other participants. In signing this release, as parent or adult signing, acknowledge Studio 180's policies as stated in the registration packet.

## Contract Dates:

I agree to abide by the rules of Studio 180 Dance, Inc., and in signing, am committing to a one year contract, September 2009 through June 2010, for this dancer. Class Space is reserved. There will be a 30 day drop period at the beginning of the year. During this period, a dancer can decide if they want to drop a class and can be refunded their tuition. However, the refund will be pro-rated based upon how many classes the dancer has taken. For example, if the dancer has taken two classes, they will only receive a refund for the last two classes of the month. After that period, however, no refunds or credits can be given for missed or dropped classes or dance programs.

Registration fees, deposits, and tuition will not be refunded. Registration fees and the first two month's tuition or annual fee is due upon registration. If a student stops attending after March 1, they are responsible for the remainder of the year's contract.

## Health Condition of Participants:

Participants must be healthy and reasonably fit to participate safely in dance classes. By signing this Participation Agreement, I agree and understand that:

1. I declare, to the best of my knowledge, that I and/or my children have the physical fitness and ability to participate safely in the specified classes and that I will participate within my ability and skill level.
2. I will submit a copy of a medical history and/or physical examination form, signed by a physician, to the Studio prior to the beginning of each academic year. The medical form will demonstrate I or my child are able to participate safely.
3. I acknowledge that even with the best instruction, the most advanced equipment, and strict observation of the rules, injuries are still possible.
4. I will bear all financial responsibility for any medical treatment arising from participation in Studio 180 Dance classes and activities.

## Image/Voice Permission:

Photographs or video/audio recordings may be taken of this dancer. I give my permission to Studio 180 Dance to photograph, film, audio/video tape, record and /or televise your image for use in any publications or promotional materials, in any medium now known or developed in the future without restrictions. If you object to Studio 180 using your image or voice in this manner, please notify Studio 180, in writing upon submission of this agreement, and check accordingly below:

- I agree to the use of image/voice of myself and/or my child by Studio 180 for marketing.
- I do not give permission for the use of image/voice of myself and/or my child by Studio 180 for marketing.

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Name of parent [print please]

signature of parent/dancer

date

## **Release and Waiver of Liability, Assumption of Risk, and Indemnification**

1. I am aware of the nature of the programs offered by Studio 180 Dance and hereby assume responsibility for myself or my children to participate. I understand dancers sometimes experience fatigue, muscle soreness, shortness of breath, or injury. I assume full responsibility for any risk of loss, property damage, or personal injury that may be sustained by me or my child or any loss or damage to property owned by me as a result of my or my child's participation in activities at or sponsored by Studio 180 Dance.
2. I understand the risks of participation and agree to indemnify and hold harmless any instructors or assignees from any loss or injury to person or property incurred on the premises or while participating in programs held at or sponsored by Studio 180 Dance. I give my children permission to participate.
3. I, \_\_\_\_\_, [student/participant, or parent or guardian of student/participant] hereby RELEASE FROM LIABILITY, WAIVE, DISCHARGE AND CONVENANT NOT TO SUE Studio 180 Dance, Inc. or any employees of the above mentioned entities [hereinafter referred to as RELEASEES] for any liability, claim, and/or cause of action arising out of or related to any loss, damage or injury, including death, that occurs as a result of my participation or my child's participation in the specified activities.
4. I also ASSUME THE RISKS of my participation or my child's in the specified activities and agree to not hold the RELEASEES responsible for any loss, damage or injury, including death, that occurs as a result of my participation in the specified activities.
5. I further agree to INDEMNIFY AND HOLD HARMLESS THE RELEASEES whether injury is caused by my negligence, the negligence of the RELEASEES or the negligence of any third party.
6. I further agree that this PARTICIPATION AGREEMENT shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above named RELEASEES. I hereby further agree that this PARTICIPATION AGREEMENT shall be construed in accordance with the laws in the State of Maryland.

**By signing this PARTICIPATION AGREEMENT, I state that I have read, understand, and agree to the conditions set forth herein and that I sign this form freely and voluntarily.**

\_\_\_\_\_  
Date                      participant name [please print]                      participant signature

*If participant is under 18 years of age, a parent/guardian must also sign this Agreement.*

\_\_\_\_\_  
Date                      parent/guardian name [please print]                      parent/guardian signature

## Medical History and Emergency Information

Dancer's  
Name \_\_\_\_\_ Birthdate[M/D/Y] \_\_\_\_\_

Dancer's  
Email \_\_\_\_\_ School Grade \_\_\_\_\_

Dancer's  
Street address \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Emergency Information

	name	Email address	Home phone	Cell phone	Work phone
Mother					
Father					
Other					
Primary Physician					

Please attach a medical history and physician examination or have your physician sign the clearance statement below.

Please describe any medical conditions, previous injuries, or concerns:

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**The following must be filled in and signed by a Physician, a Physician assistant licensed by the State Board of Physician Assistant Examiners, a Registered Nurse recognized as an Advanced Practice Nurse by the Board of Nurse Examiners, or an Orthopaedic Physician prior to the new academic year, each year.**

*I have examined \_\_\_\_\_ [dancer's name] and find the dancer cleared to participate in activities at Studio 180 Dance, Inc.*

Name [print or type]: \_\_\_\_\_

Date of Examination: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

## Dancer's History of Dance Training

Discipline studied	# Years of study	Studio name/city	comments
Ballet			
Pointe			
Jazz			
Tap			
Modern			
Lyrical			
Hip Hop			
Acro or gymnastics			
Aerial			
Zumba			
Ballroom			
other			

## Registration Payment

The person signing this form is responsible for payment upon receipt of registration forms. \$35 registration fee per student is assessed per academic year, September through June. By signing I am committing to a one year contract. Payment may be made bimonthly or annually for a discounted annual fee [see the website or call the studio for rates]. We accept checks, cash, money orders, Visa, Master Card, Discover, and American Express.

Today's Date: \_\_\_\_\_ Tuition Amount enclosed \$ \_\_\_\_\_

Check # \_\_\_\_\_ or Credit Card # \_\_\_\_\_

Expiration date \_\_\_\_\_ Security code \_\_\_\_\_

Name of card [print] \_\_\_\_\_

Signature of card holder \_\_\_\_\_

**Billing Address:**

Street \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Work Phone ( ) \_\_\_\_\_

Email \_\_\_\_\_