



Registration for 2022-2023 Dance Season

STUDENT Information:

Student #1 (*Denotes Required fields, if applicable)	
Last Name:* _____	First Name:* _____
Home Phone:* _____	Date of Birth:* _____ Age:* _____
Student E-Mail:* _____	Student Cell:* _____
Address:* _____	
City:* _____	Zip Code:* _____
Please list any health or physical restrictions (please include allergies):*	
Student #2 (*Denotes Required Fields, if applicable; Home Phone and Address if different from Student #1)	
Last Name:* _____	First Name:* _____
Home Phone: _____	Date of Birth:* _____ Age:* _____
Student E-Mail:* _____	Student Cell:* _____
Address: _____	
City: _____	Zip Code: _____
Please list any health or physical restrictions (please include allergies):*	
Student #3 (*Denotes Required Fields, if applicable; Home Phone and Address if different from Student #1)	
Last Name:* _____	First Name:* _____
Home Phone: _____	Date of Birth:* _____ Age:* _____
Student E-Mail:* _____	Student Cell:* _____
Address: _____	
City: _____	Zip Code: _____
Please list any health or physical restrictions (please include allergies):*	

****New Students Only****

Previous Experience: (Please list former studio, type of dance and how many years)

Reason for leaving previous studio: _____

PARENT/LEGAL GUARDIAN Information: (**Denotes Required Fields, if applicable*)

Name:* _____

Name:* _____

Work Phone:* _____

Work Phone:* _____

Cell Phone:* _____

Cell Phone:* _____

E-Mail:* _____

E-Mail:* _____

Relationship
to student:* _____Relationship
to student:* _____

Person responsible for billing:* _____

Address & Phone if not the same as student(s):*

Emergency Contact if the above are not available:

Name:* _____

Phone:* _____

Relationship to student:* _____



Release of Claims and Medical Treatment Authorization

Student Name

Date

Parent/Legal Guardian Name

Date

I am aware that dancing, acro and gymnastics exercise associated with it, place stresses on the body and having the possibility and risk of physical injury. It is understood that dance instruction is a physical activity and art form. It may be necessary for instructors to place hands on the student for proper placement and correction of body alignment. Each Student/Parent/Legal Guardian has the right to decline participation in which they are not comfortable or which they feel may be harmful.

Student/Parent/Legal Guardian understand and expressly assume all risks involved in connection with instruction, rehearsal, training, shows, performances and competitions, at emjæz DANCE STUDIO, LLC and/or performance spaces and/or any other venues including but not limited to risk of bodily injury occurring as a result of contact with other students, instructors, walls, equipment, floors, structures, poles, and other objects located in or near dance studios, and/or any other performance spaces and /or any other venues, the student’s physical condition or physical limitations.

Student and Parent/Legal Guardian waive all claims arising out of dance instruction, rehearsal, training, shows, competitions and performances at emjæz DANCE STUDIO, LLC and/or performance spaces and/or any other venues, whether caused by the negligence, breach of contract, or otherwise, and whether for bodily injury, property damage or loss or otherwise, which student may have against emjæz DANCE STUDIO, LLC its owners, officers, directors, shareholders, employees and agents, and their heirs, executors and administrators.

The Student/Parent/Legal Guardian is responsible for informing emjæz DANCE STUDIO, LLC in writing of all pertinent information including any special needs, medical issues, family issues or physical limitations. Student/Parent/Legal Guardian requests and authorizes that in his/her absence, the student may be admitted to any hospital or medical facility for diagnosis and treatment and authorizes physicians, or other such licensed professionals, to perform any diagnostic procedures, treatment procedures, operative procedures and x-ray treatment of the student. There is no guarantee as to the results of examination or treatment. Parent/Legal Guardian authorizes emjæz DANCE STUDIO, LLC its owners, members, board of directors, and all employees and agents of these parties to act for the student according to their best judgment in providing or arranging for emergency care in any emergency situation requiring medical attention.

All students shall be covered by their family’s insurance, if any. It is understood that emjæz DANCE STUDIO, LLC does not maintain insurance coverage on students. It is understood that the students own policy, if any, is the only source of medical insurance coverage. My medical insurance is offered through:

Insurance Company Name

Policy/ID Number

I, the undersigned, have read this release/authorization and understand all of its terms. I execute it voluntarily and with full knowledge of its legal significance. I have executed the release/authorization on the day and year stated above.

**Signature of Student (Ages 18+)/Parent/
Legal Guardian**

Home Phone #

Work Phone #

Cell Phone #

Please list any medical information that the studio should be aware of (allergies, physical limitations, etc.):

emjæz DANCE STUDIO LLC
Parent/Guardian Agreement
STUDENT RELEASE/PICK-UP

I understand that all students are to remain inside of emjæz DANCE STUDIO LLC for pick up by a Parent/Guardian.

_____ I authorize my child to be released from emjæz DANCE STUDIO LLC without an accompanying Parent/Guardian after classes. I realize by doing so I assume the risk and agree that emjæz DANCE STUDIO LLC shall not be liable in any way for injuries or accidents sustained outside of emjæz DANCE STUDIO LLC. It is your responsibility to inform your child of this procedure.

PAYMENT AGREEMENT

Please Read and Initial:

_____ There is a one time per year non-refundable registration fee due at time of registration along with the non-refundable first month of tuition, for each class you are registering for.

_____ Automatic tuition payments using a Visa, MasterCard or Discover will be taken directly from your account on the first of each month.

_____ For anyone not on auto-pay, a credit card must be kept on file. Tuition is due on the 1st with a 10-day grace period. If payment is not received by the 10th, the credit card on file will be charged on the 11th. A \$15 late fee will be applied to the account if payment is not successful by the 11th.

_____ Post-dated checks will NOT be accepted. The office cannot be responsible for holding post-dated checks. If the date on the check is past the 10th, the late fee will be applied. If the date on the check is post-dated earlier, but dropped off after the 10th, the late fee will be applied.

_____ There will be a \$30 fee added to your account for all returned checks. Please note that monthly statements will NOT be mailed.

_____ A \$15 late fee will automatically be assessed for all payments received after the 10th of the month.

_____ If an account is past due more than 60 days, the student may be asked to sit out of class. If an account is past due more than 90 days, the student may not be eligible to participate in the annual show.

_____ I understand that I am purchasing a space in the class for the 2022-2023 dance season, beginning September 17, 2022 concluding with the show on June 17, 2023. If my child withdraws from a class, tuition fees will continue to be added to my account until the studio receives an email/written letter of withdrawal. I am responsible for payment of tuition until I officially withdraw from the class or for the remainder of the 2022-2023 dance season if the withdrawal is after December 31, 2022.

_____ I understand that there are NO refunds, adjustments or pro-rating given for discontinued or missed classes. If my child withdraws after the first of the month, I am responsible for payment for the remainder of the month. If registering mid-month, I am responsible for the whole month of tuition. If I choose to pay by semester or full year and withdraw, a 20% service charge will be deducted from my refund. If you are enrolled in multiple classes, semester refunds will be credited to your account.

_____ I understand there are NO refunds given for the first payment of tuition and it may not be applied to any other month or transferred to another class.

_____ I understand there are no withdrawals or refunds given for any reason after December 31, 2022 and that I shall be responsible for tuition for the remainder of the 2022-2023 dance season even though my child has ceased from participating in classes (this includes withdrawal for any and all reasons including but not limited to time conflicts with other activities, lack of interest, etc.).

_____ I understand I am automatically signed up for Remind to receive studio notifications. You will need to approve it once you receive the notification on your phone.

_____ You may cancel this contract for any reason at any time prior to midnight of the third business day after the date on which the first service under the contract is available. The registration fee however, is non-refundable.

_____ I have read and understand the policies of emjæz DANCE STUDIO LLC as stated in the 2022-2023 studio brochure.

Failure to pay your bill: Financial hardships may occur to any of us. These hardships should be discussed with the owner so that necessary arrangements can be made. Non-payment may result in collection efforts or legal action. Of course, this is a regrettable action only used when other efforts have failed. If an account is sent to collection, you will also be held financially responsible for all collection fees, including but not limited to attorney fees, administrative time, court costs, etc., assessed to emjæz DANCE STUDIO LLC.

Miscellaneous: No failure delay by emjæz DANCE STUDIO LLC in enforcing any right under this agreement will operate as a waiver of that right under this agreement or prevent emjæz DANCE STUDIO LLC from exercising any other right under this agreement. No amendment or waiver of any term of this agreement will be effective unless it is in writing. If any provision of this agreement is found to be invalid or unenforceable, it will be considered separate and severable from this agreement and will not affect the validity of enforceability of any other term of this agreement. This agreement will be governed by the laws of the State of Ohio.

I, the undersigned, have read this release/agreement and understand all of its terms. I execute it voluntarily and with full knowledge of its legal significance.

Parent/Legal Guardian Name: _____

Parent/Legal Guardian Signature: _____

Date: _____

Signature of Owner: _____

Date: _____

emjæz DANCE STUDIO
Photo/Video/Audio Consent Form

I, the undersigned, do hereby consent to the use by **emjæz DANCE STUDIO LLC** of my image, my child's or ward's image, voice, or both, in video, photograph, audio tape; and any video, photograph, or audio tape, reproduced either in whole or in part from the video, photograph, or audio tape regardless of whether these materials are used for fundraising, advertising, publicity, or any other purpose on behalf of **emjæz DANCE STUDIO LLC** and its affiliates/contractors.

In addition, I waive all claim to compensation or damages based on the use of said image or voice, or both, by **emjæz DANCE STUDIO LLC** and its affiliates/contractors. I also waive any right to inspect or approve the finished photography, video, or audiotape.

I agree that all such portraits, pictures, photographs, video and audio recordings and any reproductions thereof, all plates, negatives, recording tape, and digital files shall remain the property of **emjæz DANCE STUDIO LLC**, unless otherwise noted.

I agree to not post any pictures, video or audio recordings from that of **emjæz DANCE STUDIO LLC** property, video choreography, music or performances on sites such as youtube, facebook, twitter, instagram, snapchat or any other social media site. I understand posting of such pictures, video and audio is a violation of copyright laws and I will solely be responsible for any damages or claims arising. Furthermore, I agree to hold harmless **emjæz DANCE STUDIO LLC**, its affiliates/contractors and waive all claims for damages resulting from that of parent, student or community members posting pictures, video or audio on sites such as facebook, youtube, twitter, instagram, snapchat or any other social media site.

I understand that this consent is perpetual, that I may not revoke it, and that it is binding on my heirs and assigns. I warrant that I am at least 18 years of age and have read this consent form and fully understand its contents.

Name of Student(s) Attending

Signature of Student/Parent/Legal Guardian

Date

Printed Name of Student/Parent/Legal Guardian