

Fairytale Dance Academy
SUMMER 2015 Registration Form

Please fill out and mail to Fairytale Dance Academy, P.O. Box 135361, Clermont, FL 34713-5361

Last name		Parent	
Student		Birth date	Medical concerns/ helpful info to know about child
Student		Birth date	
Student		Birth date	
Mailing Address			City/Zip
Email Address			
Phone Number	Who to call in Emergency & Phone #		
How did you hear about Fairytale Dance Academy			
Helpful information for the teacher to know:			

ONE-DAY 2015 SUMMER FUN DANCE PROGRAMS

Please list each child on a separate line. Thank You!

Student(s)	Program	Ages	Date	Time	Tuition	Tuition for Returning Student or Siblings <small>(returning student was enrolled in summer 2014 or 2014-2015 8/12 wk class)</small>	Sub-Total
	Stars In Your Eyes	4-7yrs	June 10	1:00-4:00pm	\$30	\$25	
					\$25		
					\$25		
	Stars In Your Eyes	7-11yrs	June 17	1:00-4:00pm	\$30	\$25	
					\$25		
					\$25		
	Nutcracker, All Jazzed Up	4-7yrs	June 24	1:30-4:30pm	\$30	\$25	
					\$25		
					\$25		
	Nutcracker, All Jazzed Up	7-11yrs	June 24	12:30-4:30pm	\$35	\$32	
					\$32		
					\$32		
TOTAL DUE							

DEPOSIT: \$15/student per program deposit is due with registration. *Deposit is non-refundable and non-transferable. Tuition balance is due May 1, 2015. Tuition balance is refundable when written notice of withdrawal is received by May 1, 2015. Tuition is non-refundable and non-transferable after May 1, 2015 since supplies will already have been purchased.*

TOTAL PAYMENT with registration	\$		
Payment Note:			
Payment Method <i>(Please check one)</i>	Please make CHECK payable to <u>Elisa Kaplan</u> and in memo section: <u>FTDA and student's name</u>	PAYPAL <i>info@fairytaledance.net</i>	Date pd PayPal

RELEASE/LIABILITY: Fairytale Dance Academy and instructors are not liable for personal injuries or loss of or damage to personal property. During a physical activity, injuries may occur. Each student may decline to participate in any activity which may be personally harmful, and is also responsible for informing the instructor(s) of any physical limitations which may prevent full participation in class. **I permit Fairytale Dance Academy to take and use photographs and videos of my child for studio marketing purposes. I have read and understand Fairytale Dance Academy's policies including non-refundable \$15/student per program deposit, tuition, and refund policies.**

Parent/Guardian: _____ Date: _____