

SHREVEPORT DANCE ACADEMY

REGISTRATION FORM

Today's Date _____

Circle: **NEW** or **RETURNING**

Name of Student		Billing Name / Relationship <i>(only if other than parents)</i>	
Name of Parent(s)		Billing Address <i>(only if different than Student)</i>	
Student's Address		Billing City / State / Zip <i>(only if different than Student)</i>	
City/State/Zip		*Emergency Contact Name & Number	
Primary Phone:	Mom's Cell Phone:	Dad's Cell Phone:	Student's Cell Phone:
Student's Age:	Student's Date of Birth:		*Where did you hear about Shreveport Dance Academy
Parent's e-mail: (please print legibly)		Please list all siblings / students included on this account:	

Classes Registered For:

Class Name	Day of Week	Time of Class	Class Name	Day of Week	Time of Class

***Please list any pre-existing medical conditions:

TUITION PAYMENT OPTIONS

- Annual 12% Discount (August – May)
 - Semi-Annual 8% Discount (August – December/ January – May)
 - Monthly *AUTOMATED PAYMENT ONLY* from your designated credit or debit card*
- Monthly Payments are drafted the 5th of every month

PLEASE CAREFULLY READ & COMPLETE THE REVERSE SIDE

Student is NOT ENROLLED until ALL applicable fees are paid and billing information is completed and SIGNED by Parent or Guardian.

SHREVEPORT DANCE ACADEMY

Welcome to Shreveport Dance Academy. Please read the following policies carefully and feel free to ask questions. It is our intent to provide your child with an exciting and enjoyable learning experience.

- **ALL REGISTRATION FEES must be paid at registration.** Enrollment is *not* complete until Registration Fees are paid and a registration form is signed by a parent or guardian.

Registration Fees, Recital Fees & Costume Fees are NONREFUNDABLE.

- **MONTHLY TUITION is paid ONLY by *automated* payment monthly.** AutoPay will draft your designated account (below) the 5th of each month, *September through May*, for tuition payments. Semi-Annual & Annual payment options are available for cash, check, or credit card payments at time of registration.

Your signature below authorizes Shreveport Dance Academy
to draft your account for tuition payments only.

A \$25.00 fee will be assessed on all insufficient accounts, returned checks, declined monthly payments.

MONTHLY AUTOMATED CREDIT/DEBIT PAYMENT INFORMATION - PLEASE PRINT LEGIBLY

Name (exactly as it appears on card) _____

Billing Address of this card _____

City _____ State _____ ZIP* _____

Card Type: Visa MasterCard Card # _____

Exp. Date (mm/yy) _____ Security Code (on back of card) _____

I authorize SHREVEPORT DANCE ACADEMY to charge tuition fees to the above account on or after the 5th of each month, October 5, 2020 through May 5, 2021. I understand that withdrawals must be submitted in writing 30 days in advance to avoid continued charges.

X _____
(cardholder signature)

- **WITHDRAWAL forms must be completed and signed 30-days prior to withdrawal date to insure the termination of the automated payment system. Please contact our office immediately if withdrawing.** Dancers withdrawing without giving written 30-day notice will forfeit all tuition paid.
- **ENROLLMENT - All classes must have a minimum of five (5) dancers enrolled.** If it becomes necessary to cancel a class due to lack of enrollment, we will do our best to place dancers in another class. If we are unable to do so, the tuition will be refunded and/or prorated depending upon classes attended.
- **SPRING RECITAL is an exciting experience and all students are encouraged to participate. Participants must complete a separate Recital Permission Form and pay a non-refundable Recital & Costume Fee.**
- **MAKE-UP CLASSES - Shreveport Dance Academy offers make-up classes for student absences within 2 weeks of missed class. No Exceptions.**
- **INCLEMENT WEATHER – Shreveport Dance Academy generally follows the inclement weather policies of the Caddo school systems.** In the case of inclement weather closures we will offer make-up classes as studio and instructor availability allows.
- **LIABILITY RELEASE - Shreveport Dance Academy is not liable for injuries sustained on their premises or during functions or events involving Shreveport Dance Academy.**
- **MEDIA RELEASE – Shreveport Dance Academy has my permission to use media images of my child for advertising and/or informational and instructional purposes.**

* Parent signature below indicates understanding of and compliance with all of the policies stated above.

X _____
Parent's Signature _____ Date _____