

SEE OTHER SIDE

Academy Registration Form

Student Information Name of Student: Date of Birth ____/___ Gender: _____ Age: _____ Grade: _____ Home Address: City:_____State:____Zip:____ Home Telephone (_____) _____ Academic School: Parent/Guardian One Name of Parent/Guardian: Home Address (if different from student): City: _____State: ____Zip:_____ Home Phone (if different from student) (_____) _____ Employer: _____ Work/Secondary Phone (_____) Parent/Guardian Two Name of Parent/Guardian Home Address (if different from student) State: Zip: Home Phone (if different from student) (____) Employer: Work/Secondary Phone (_____) Email: **Billing Information** (if different from above) Home Address: City: _____State: ____Zip:____ Check #_____

Full Payment 💭	Installment Payment
Tun I ayment	□2 Months □3 Months □4 Months
Annual Tuition \$	Payment \$
Registration Fee $\frac{25}{25}$	Registration Fee \$ 25
Total \$	Payment Plan Fee \$\frac{30}{25}
<u>ψ</u>	Total: \$
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Waiver of liability/ Medical/M	edia Release/Agreement to pay
I am aware that dance training places unusual stress or assume the risk and agree that CM Dance School, Facu	ulty, and any of the chaperones and agents shall not
be liable in any way for any injuries sustained or loss of its related functions. My child has permission to be tre	
Medical Insurance and number:	
Please share any information that will help us provide IBA Norwell such as allergies, special medical conditions are such as allergies.	
I give my permission for photographs or television for purposes on television, newspapers, magazines, brocht	
I understand that CM Dance School can cancel classes the right to change teachers and staff. I understand an non refundable \$25 registration fee and tuition deposit payment plan is available with an additional \$30 fee at payment is due by December 1 of the current calendar month the credit card will be charged.	that have less than 12 students enrolled and reserves d agree that there are no refunds for any reason. A is due upon submission of this form. A 4 month and payments are due by the 1 st of each month. Full
There will be a \$25 service charge for all checks rec	eeived with insufficient funds!
No Refunds for any reason.	
*Must be signed	
Signature of parent or guardian	Date
How did you hear about us?	
Previous Training including schools and teachers:	