



Registration Form
For New Adult Students

Summer 2018

Payment in full must accompany the form and will secure class placement and discounts.

Date _____

Mail to: PO Box 1259, Katy, TX 77492 or drop in the payment box located on the front porch of the studio.

Name _____

Please check the appropriate box(es) for the student above. For add'l students in the same family, please print add'l copies of the first page and complete student's info through "allergies."

- Week 1: June 5/7 [] AM Ballet [] PM Ballet [] Tu Tap [] Th Tap
Week 2: June 12/14 [] AM Ballet [] PM Ballet N/A Tu Tap [] Th Tap
Week 3: July 10/12 [] AM Ballet [] PM Ballet [] Tu Tap [] Th Tap
Week 4: July 17/19 [] AM Ballet [] PM Ballet [] Tu Tap [] Th Tap

Birth Date (mm/dd) _____ (you may omit year & age)

Physical Limitations (i.e. arthritis, prior injuries, etc) No or Yes (explain) _____

Learning Disorders (ADD, Dyslexia, etc) No or Yes (explain) _____

Allergies (food or otherwise) No or Yes (explain) _____

Spouse's Name (if applicable) _____

Mailing Address _____ Apt _____

City _____ Zip Code _____ Subdivision _____

Email Address _____

Home Phone Number (_____) _____ (if no home phone, please leave blank)

Your Cell Phone (_____) _____ Spouse's Cell Phone (_____) _____

Your Work Phone (_____) _____ Spouse's Work Phone (_____) _____

Add'l emergency contact name and number (optional) _____

Referred By: (circle one) _____

Search Engine/Website (Which one?) _____ Word of Mouth (Who?) _____

Signs/Banners Yellow Pages: Phone Book or Internet Other _____

(continued on back)

Psalm 149:3 Let them praise His name with dancing.

Past Dancing Experience (other than En Avant) No or Yes (where, when, what kind, how long?)

★★★If someone other than you is paying for your dance classes, please provide name, address, phone number(s) and email address here:

En Avant Studio
Adult Student Contract
Summer 2018

Required with registration form; please sign at the end.

Attendance

I understand that students more than 10 minutes late will not be permitted to enter the class, for their safety and the flow of the class.

Choreography

I understand that any dances taught at En Avant Studio may not be copied or distributed or used for any performances outside of the studio without the written permission of the director.

Hold Harmless

I agree to release and hold harmless En Avant Studio, its officials, faculty and staff, agents, other employees or volunteers from any actions, suits, damages, claims or judgments that may result from any personal injury that my child, myself or any guest sustains while on the premises of En Avant Studio and at all off-site activities offered to me. I will responsibly supervise all children I bring to En Avant Studio and make certain they follow the playground rules.

Safety & Health

I understand that En Avant Studio is a drug, alcohol, tobacco, weapon and profanity-free environment.

Payments

I understand that all payments are non-refundable.

Photographs/Marketing

I understand that photographs of me may be taken for the promotion of En Avant Studio. I agree that they may be used for, but are not limited to, brochures, literature, newspaper advertising, website, Facebook, etc, including video marketing. I understand that students' names and personal information will not be published.

Signature:

_____ Date _____