



**INSTRUCTIONS**

Complete each Section, except Section 3. Return registration to EDGE. We will complete Section 3 and contact applicant to finalize registration.

Date		Referred by	
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**SECTION ONE**

STUDENT INFORMATION				
	First/Last Name	Birth Date	Email (to receive announcements)	Evaluation/Placement (Office)
1				
2				
3				

PARENT INFORMATION	
Parent/Guardian Name	
Address (Suite, Apt)	
City, State, Zip Code	
Main Contact Phone	
Main Contact Email	
Emergency Contact/Phone	
Other Parent Name/Phone	
Get email announcements? Y or N	

PAYMENT INFORMATION	
Name on card	
Credit card Number	
Expiration date	
Security code	
Address (if different)	
City, State, Zip (if different)	
Phone number (if different)	
Authorized Signature	

**SECTION TWO** Enter the class information for each class you wish to enroll in for each dancer.

Dancer (1)

1		5	
2		6	
3		7	
4		8	

Dancer (2)

1		5	
2		6	
3		7	
4		8	

Dancer (3)

1		5	
2		6	
3		7	
4		8	

**SECTION THREE: TUITION AND FEES** (Office use only)

Annual Registration Fee: Individual: \$40; Family registration (2 or more dancers): \$40 first dancer, \$15 per additional dancer

NUMBER OF ENROLLED COURSES	1	2	3	4	5	6	7	8
Monthly (9 payments)	\$66	\$128	\$186	\$240	\$290	\$336	\$378	\$416
Drop-in Class	\$17							

10% Tuition Discount for yearly tuition paid in full at the start of the school year. Teen Company: \$75 per month, plus tuition/fees.

OFFICE USE ONLY. We will complete Section 3, and return to complete registration. Auto-payment is made on 5<sup>th</sup> of each month

DANCER 1	REG FEE	PAY 1	PAY 2	PAY 3	PAY 4	PAY 5	PAY 6	PAY 7	PAY 8	PAY 9
DUE DATE			OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY
FEE										
TEEN CO										
TOTAL										

DANCER 2	REG FEE	PAY 1	PAY 2	PAY 3	PAY 4	PAY 5	PAY 6	PAY 7	PAY 8	PAY 9
DUE DATE			OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY
FEE										
TEEN CO										
TOTAL										

DANCER 3	REG FEE	PAY 1	PAY 2	PAY 3	PAY 4	PAY 5	PAY 6	PAY 7	PAY 8	PAY 9
DUE DATE			OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY
FEE										
TEEN CO										
TOTAL										

**SECTION FOUR: CREDIT CARD HELD ON FILE AND AUTO-PAYMENT AUTHORIZATION**

Initials

- With your initials, you authorize EDGE to keep your credit card information (included on this registration form) to be held on-file and used for any outstanding balances that are due, including late and insufficient funds fees.
- With your initials, you authorize EDGE to charge the credit card on file for monthly auto-payment tuition (5th day each month).

**SECTION FIVE: POLICIES** Initial that EDGE has made you aware of and you understand each policy.

Initials

- A student evaluation/placement class may be required to enroll. The program manager makes all final determinations as to student placement.
- Annual registration fee and at least first month of tuition due to enroll.
- Enrollment is limited to 30 students per course. Classes with fewer than 30 students are open to drop-in dancers.
- Make-up classes are available on a limited basis and expire. You are aware of and understand our make-up policies.
- Class transfers and refunds are available on a limited basis. You are aware of and understand these policies.
- You have received and understand the program and studio policies.
- Please direct all questions and concerns to the program director on-site during the classes and other select times. If you wish to conference with a teacher, please make arrangements in advance with the program director.

**SECTION SIX** Provide additional information, if needed.

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**SECTION SEVEN: LIABILITY AND RELEASE WAIVER – SIGN AND DATE**

Dancing is a strenuous activity from which injuries could arise. EDGE Performing Arts Center, L.A. DanceForce, Inc., the teachers and employees are not liable for personal injuries, or loss of, or damage to personal property. Each student may decline to participate in any activity. Please inform EDGE and instructor of any physical limitations you may have. If you are in doubt as to your physical abilities, please consult your physician before participating. I represent that I am, or my child is, physically able to participate in all activities. I hereby authorize any and all medical attention to be administered to myself or child, in the event of accident, injury, sickness, etc., under the direction of EDGE Performing Arts Center, until such time as I or the appointed emergency contact person may be contacted. I assume the responsibility for the payment of any such treatment. I have notified EDGE of any special medical needs or information required for myself or child. I, for myself, my child, my spouse, heirs, legal representatives and assigns, expressly release, waive, discharge and hold harmless EDGE Performing Arts Center, and L.A. DanceForce Inc, its officers, directors, employees, teachers, agents, successors, predecessors, sponsors, legal representatives and assigns from all claims, demands, losses, actions, judgments, suits, executions and liabilities of any kind. In addition, this release is for the entire premises of EDGE Performing Arts Center, including but not limited to common areas, restrooms, changing rooms, studios, offices, sidewalks, stairwells, elevators, parking areas and grounds and any location an activity may be held.

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Parent/Guardian Signature

Date