Freestyle Dance Academy 341 Lower State Road Chalfont, PA 18914

DANCER(S) REGISTRATION FORM

Please review thoroughly and complete all pages of this form prior to the first dance class of the session.

I would like to register for:

Dancer Name:	Class Name /Time	TUITION
	-3	
	<i>J. j.</i>	
Make checks payable	e to: Freestyle Dance Academy, LLC	
-/-		
Father's Name (for minors):		
Street Address:		
City, State, Zip:		
Home Phone:	Cell Phone:	
Email:	Date of Birth:	
Previous dance training (classes, levels and	d location):	
Any pre-existing physical or behavioral co	ondition(s):	
Allergies:		
Medication:		

LIABILITY RELEASE

Please read the following carefully. The study of dance is a dangerous activity. This agreement includes important information and releases. Please ask us if you have any questions about this Agreement.

I understand that the study of dance has inherent risks and may cause physical injury. I am fully aware of the risks and hazards involved. Attendance in Freestyle Dance Academy classes, rehearsals, or activities may result in intense physical exertion and cause unforeseen risks and injury. I personally, as the participating student or the parent or guardian on behalf of the participating student, intending to be legally bound, do hereby, for myself, my heirs, executors and administrators, irrevocably release, discharge and agree to hold harmless Freestyle Dance Academy, LLC, June Mitchell, Steve Mitchell, Tony Azzaro, their subsidiaries and affiliates and each of their respective managers, directors, members, shareholders, officers, agents, employees, representatives and volunteers (all of the foregoing being referred to herein as the "Released Parties") from any liability whatsoever for any and all claims of any nature which may arise out of or relate to me or my child's attendance at, participation in or association with movement, dance and related classes, rehearsals, or other activities held at, sponsored by or in which Freestyle Dance Academy, LLC participates or during any Freestyle Dance Academy, LLC activity or event (i.e., recitals, competitions, fundraisers, etc.) taking place outside of the studio (and any travel to or from any such event) or any dangerous conditions of any property upon which the activities may take place (collectively, the "Released Claims"). I further covenant and agree not to sue the Released Parties for any Released Claims.

(student's name)

In case of emergency, I give my permission for ___

SCHOOL POLICIES

ATTENDANCE

Freestyle Dance Academy, LLC ("FDA") was created to educate the whole dancer in various styles by cultivating technical proficiency and creativity. Students must attend class regularly and in a timely manner in order to progress. The school reserves the right to ask students that are late for class to sit out that class. If a student is repeatedly late or absent without notice, FDA may terminate lessons. FDA encourages its students to make up any missed classes by taking another class of an equal skill level. However, it is the student's responsibility, not that of FDA, to sign up and attend any make up classes. Missed classes will not be reimbursed. TUITION IS NON-REFUNDABLE. NO EXCEPTIONS.

STUDENT CONDUCT

No chewing gum, food or open containers are allowed in the dance studios. Students may not leave class without permission from the instructor. All students are expected to conduct themselves in a safe, courteous and responsible manner. Students are expected to be polite to each other as well as to FDA employees and guest faculty. Any rude or aggressive behavior from students or parents will not be tolerated. Any use of offensive language or harassment of FDA employees will result in dismissal without refund. There will be a \$10 charge to anyone who opens the fire safety door, located in the lobby, without instruction to do so or proper cause. No one, other than FDA employees, is permitted to be upstairs at any time unless the Studio Director gives permission.

PARENT CONDUCT

Parents are not to discipline a child that is not their own. Please report any problems to the FDA office immediately. Students and parents are expected to be polite to one another as well as FDA employees. Any rude or aggressive behavior from students or parents will not be tolerated. Any use of offensive language or harassment of FDA employees will result in dismissal without refund.

DISMISSAL

Every FDA student is expected to behave in a disciplined, responsible and courteous manner when on FDA premises or participating in events or activities as an FDA student. Any consistently disruptive behavior will be reported to parents. Rude or aggressive behavior from students or parents will not be tolerated. Any use of offensive language, drugs, alcohol or tobacco products at FDA will result in dismissal without refund. FDA reserves the right to suspend or expel any student, at anytime, whose attitude, class attendance, work habits, payment record, overall conduct or physical fitness for dance training is judged unsatisfactory by FDA representatives. All tuition paid to FDA on behalf of any discharged student is forfeited.

ATTIRE

Students are required to dress and arrange hair properly for class—this includes having correct shoes. FDA teachers reserve the right to prohibit improperly dressed students from participating in class. Please talk to the specified instructor for more information on appropriate dance class attire.

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BEFORE/BETWEEN/AFTER CLASSES

Students should not be left at the studio for excessive amounts of time before or after lessons or rehearsals. Students are welcome to relax in the reception area and do homework between classes. Siblings must be monitored at all times by a parent, guardian or caretaker and the parent, guardian or caretaker assumes all responsibility of any action performed by the student or siblings when on FDA property. Students must arrive no sooner than 15 minutes prior to class time. The School is not responsible for caring for students who are dropped off early or not picked up in a timely manner. If an emergency occurs hindering timely pick up, please notify the office. If the studio director must wait for a student to be picked up after closing, a childcare fee of \$10 per 15 minutes will be charged.

HANDS-ON TEACHING

FDA teachers may make physical adjustments of students' bodies during instruction. If you do not wish to receive physical adjustment (for yourself or your child), please inform the instructor prior to beginning class. For further explanation of this policy, or questions regarding why it is in place, please ask FDA staff.

INJURIES

By participating as an FDA student, parents, legal guardians of minors, students, and adult students waive, among other things, the right to any legal action against FDA and its affiliates and subsidiaries and their respective owners, employees and agents for any injury sustained on school property, or at any FDA event away from school grounds (i.e., performances, shows, recitals, competitions, etc.), resulting from any activity conducted by the students before, during, or after class time. Students must have a completed liability release turned in BEFORE lessons begin.

INSURANCE

FDA does not carry medical insurance for its students. It is required that all students be covered by their own family medical insurance policies. If injury occurs, it is understood that a medical insurance policy in the student's name or student's family or guardian is the only source of reimbursement.

PAYMENT

All fees must be paid on time. Cash, checks, and money orders are accepted. There will be a \$25 penalty for any returned checks.

Please, make checks payable to Freestyle Dance Academy, LLC.

Send completed registration forms and payment to:

Freestyle Dance Academy

at Camp America Day Camp 341 Lower State Road Chalfont, PA 18914

Or, bring completed registration materials and payment to the first class.

WITHDRAWAL FROM CLASSES

If it is necessary for a student to withdraw from classes, FDA must receive written notice during the first week of the month. Any pre-paid lessons following FDA's receipt of written notice during the first week of the month will be refunded after the notice has been received.

I have read and understand the above policies and agree to abide by them.
Student Name (print clearly):
Signature (parent, legal guardian or adult student):
Date:
FRESTALE DANCE ACADEMY