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| --- | --- |
| **DDS Registration Form & Student Information**    **STUDENT INFORMATION (Please Print Clearly)**  Student’s Full Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_  Student’s DOB \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_AGE\_\_\_  Parent(s) or Guardian(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Parent’s Place of Employment\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Emergency Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Emergency Contact Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email (Primary) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email (Secondary) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    **If a friend referred, you to us please print their name & date here.**  **Referred By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_/\_\_**  **AUTHORIZATION**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_/\_\_\_\_  Parent/Guardian Signature date   |  | | --- | |  | |

**DeGrasse Dance Studio Registration**

**General Class Information and Pricing**

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| --- | --- | --- |
| **Number of Classes** | **Annual Registration Fee**  **Nonrefundable** | **Monthly Tuition**  **\*\*see tuition discounts** |
| **Recreational classes:**  Tap  Hip hop  Strength & Stretch  Dance Acro  1 class per week  2 classes per week  3 classes per week  4 classes per week  **Pilates Session 1 #6 classes** | **$75**  **$75**  **$75**  **$75**  **$0** | **$75**  **$125**  **$175**  **$225**  **$90** |
| **Creative movement (ages 3 -4 )** | **$75** | **$75** |
| **Baby Ballet**  **(age18 months-up to 3yrs)** | **$25** | **$77**  **#7 classes**  **1st session *see schedule*** |
| **Number Classes**  **Ballet +other dance genres** |  |  |
| **1 ballet, Jazz, Contemporary, tap, lyrical or any other genre per week** | **$95** | **$98** |
| **2 classes per week** | **$100** | **$140** |
| **3 classes per week** | **$120** | **$183** |
| **4 classes per week** | **$145** | **$248** |
| **5 classes per week** | **$145** | **$268** |
| **6 classes per week** | **$145** | **$288** |
| **7 classes per week** | **$150** | **$298** |
| **8 classes per week** | **$150** | **$310** |
| **9 classes per week** | **$150** | **$315** |
| **10 classes per week** | **$150** | **$320** |
| **11 classes per week** | **$150** | **$325** |
| **12 classes per week** | **$150** | **$330** |

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| **Performance fees-nonrefundable**  **A performance fee will be charged to EVERY family for the December and June performances. This fee covers rehearsals, choreography, stage rental,video, etc.**  **See payment schedule for due date** | **Costume Fees nonrefundable**  **A costume servicing, purchase or rental fee per costume will be charged. Costumes must be returned to the studio after use , if rented.** | **\*\*Tuition Discounts**  **$15 off sibling registration**  **15% off sibling tuition** |
| **The Nutcracker Performance fee $150 per family is**  **Not included in tuition payments.**  **Tickets must be purchased for all performances**  **Summer Performance Fee $150** | **The Nutcracker Costumes -$55 to $150 per costume are all rentals & must be returned in the same condition when rented**  **Summer performance - $55 to $150 per costume** |  |

***Required Attire for your level: order your “Liesl Dancewear” Online***

***Go to:*** www.lieslshop.com and call the shop for assistance if needed. (You will need to enter our dance studio name where indicated.) [(571) 659-2937](tel:%28571%29%20659-2937)

***Order your required leotard & skirts according to ballet level (the shop can help with this as well in person):***

* *Creative movement*
* *Pre-Ballet*
* *Intermediate 8/9*
* *Intermediate 10/13*
* *Juniors*
* *Apprentice B*
* *Apprentice A*
* *Senior*

**DeGrasse Dance Studio**

**Registration & Tuition Payment Agreement Information: 2022-2023**

PAYMENT POLICY:

Monthly tuition will be charged on the 1st to the 5th of each month and any additional fees will have a scheduled due date. Payments for tuition, performance expenses or competition fees will automatically be charged using an authorized credit card or deduction from a savings or checking account. Each student will have their payment information on file with the Bookkeeper.

If payment is made other than by the standard method, the following charges will be applied:

\*\* Declined credit cards or NSF debits from bank accounts with be charged a fee of $35.00.

\*\* Special payment arrangements will be charged a service fee of $25.00 per event.

Contact Dianne Auburn at 703-507-1693 or aubsa@hotmail.com, if there are any changes in payment information.

One of the two Authorization Forms below MUST be filled out and signed:

\*Form #1: Automatic withdrawal from your Visa or MasterCard or Debit authorization.

OR

\*Form #2: Automatic withdrawal from your checking account authorization.

(MUST include a voided check)

**Drop-Out Policy:**

**DeGrasse Dance Studio requires 30 days written notice (1 month) if you choose to drop out of classes or a class. (For example, if you drop out on the 15th of the month, you will still be responsible for the following month.) We are unable to give refunds. (We will make exceptions if there is an injury but will need documentation from a physician to freeze tuition billing. However, we do not give refund, but would credit the rest of that month partially, to the following month.) We have limited space in our classes, therefore, without the 30 days’ notice you will be charged for the subsequent and final month.**

All written notices to withdraw must be emailed to Dianne Auburn, and all questions concerning your billing and your account should be directed to: Dianne Auburn at: aubsa@hotmail.com

**DDS Payment Authorization Form: (\*One of the following options must be selected.)**

Authorization Option #1

I understand that my credit card will be charged the 1st of each month for my tuition payment and any annual registration fee due. I authorize DeGrasse Dance Studio to use the Visa, MasterCard, Visa Debit Card, or MasterCard Debit card number below beginning the month of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Name on Credit Card \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit Card Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp Date \_\_\_\_\_\_code\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

- OR -

Authorization Option #2 –

I understand that my checking account will be debited the 1st of each month for my tuition payment and my annual registration fee due.

I authorize DeGrasse Dance Studio to use the account number below beginning the month of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Name on Account \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_

\*\*Please provide voided check if choosing option 2.

MONTHLY TUITION AMOUNT $\_\_\_\_\_\_\_REGISTRATION AMOUNT $\_\_\_\_\_\_\_\_\_\_\_\_

**DeGrasse Dance Studio Payment Schedule Agreement**

**Payment schedule includes registration fees, monthly tuition, and miscellaneous fees you may or may not incur.**

**Miscellaneous fees include:**

* Service fees for costumes: $55 to $150 per costume- additional charges may occur depending on costume
* Performance fees: $150 per family
* Tickets for all performances will have to be purchased.
* If enrolled in Competition : $155 due the 1st of each month plus incurred private rehearsals ,costumes & choreography fees.
* Required Leotards for ballet students only>>see order online info below – www.lieslshop.com

**Payment Schedule for Enrolled Students:**

**July 1 , 2022 Registration fees due for season 2022-23**

**September 1 Tuition due**

**October 1 Tuition due**

**October 15 \*TBD: Nutcracker Fees due**

**November 1 Tuition due**

**December 1 Tuition due**

**January 1, 2023 Tuition due**

**February 1 Tuition due**

**March 1 Tuition due**

**April 1 Tuition due**

**April 15 June Performance fee $150 due (per family) plus costume fees**

**May 1 Tuition due**

**June 1 Tuition due ( last payment in full for 2022-23 season)**

**June 1 Summer Intensive sign up**

**July 1 Summer Intensive fees due**

**July 1 Registration due for 2023-2024 season**

**Sept 1 Tuition due for September 2023**

**Sept 6 Classes Begin**

\*Print name below and Sign below:

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_have read , and understand the monthly payment schedule, and will abide by this schedule. I understand that my account will be charged any penalty fees incurred by the bank , for insufficient funds. A late fee of $35.00 will be charged to my account if payment is not made within 5 days of the due date each month. **If I decide to withdraw my child or a sibling , of a child still enrolled , from DDS , I must give 30 days written notice , via email to Dianne Auburn (** [**aubsa@hotmail.com**](mailto:aubsa@hotmail.com) **). Sending an email to anyone else , including Johnna DeGrasse ,will not stop charges on my account. If sending an email to Johnna DeGrasse I MUST SEND A COPY to Dianne Auburn.**

X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_/\_\_\_\_

Signature (person responsible for payment) Date

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student Enrollment Form of weekly classes:**  **Name student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **(please print & fill out 1 form for each sibling)**   |  |  | | --- | --- | | **creative movement** | **1 class per week\_\_\_** | | **Ballet**  **Level\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**    **+ Pointe classes** | **1 ballet class per week\_\_\_**  **2 ballet classes per week\_\_\_**  **3 ballet classes per week\_\_\_**  **2 pointe classes per week\_\_\_**  **3 pointe classes per week\_\_\_** | | **Jazz**  **Level\_\_\_\_\_\_\_\_\_\_\_\_** | **1 class per week\_\_\_** | | **Lyrical**  **Level\_\_\_\_\_\_\_\_\_\_\_** | **1 class per week\_\_\_** | | **Contemporary**  **Level\_\_\_\_\_\_\_\_\_\_\_** | **1 class per week\_\_\_** | | **Hip Hop**  **Level\_\_\_\_\_\_\_\_\_\_\_**  **Tap**  **Level\_\_\_\_\_\_\_\_\_\_\_\_**  **Strength /stretch**  **Pilates 6 classes** | **1 class per week\_\_\_**  **2 classes per week\_\_\_**  **1 class per week\_\_\_**  **1 class per week\_\_\_**  **6 classes\_\_\_**  **Total # classes per week\_\_\_** |  |  |  | | --- | --- | | ***Competition team only***  **monthly fee** | $\_\_\_\_\_\_\_ | | **Total monthly charges** | $\_\_\_\_\_\_\_ |   I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ acknowledge that the above information  *(name parent or person responsible for payment* is correct. I will inform Dianne Auburn in writing at [aubsa@hotmail.com](mailto:aubsa@hotmail.com), if the number of enrolled classes taken by my child , or children , changes , at any time throughout the season, I will update class information, by turning in this form. I will be responsible for any tuition due and understand DDS will not be held responsible for refunds if not given 30 days written notice. I understand that there are no refunds for missed classes, or partial month refunds, etc.  Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_date:\_\_\_/\_\_\_/\_\_\_ |

**Mandatory COVID-19 Waiver – DeGrasse Dance Studio**

In checking and initialing the space below, I agree, acknowledge, and understand that classes or activities at, or sponsored by, DeGrasse Dance Studio may be physically strenuous, and participation includes possible exposure to and illness from infectious diseases including but not limited to influenza and COVID-19.

While rules and personal discipline may reduce this risk, the risk of serious illness and death does exist and I voluntarily participate in them. I willingly agree to comply with the stated and customary terms and conditions for participation in regard to protection against infectious diseases.

I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of others and assume full responsibility. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless DeGrasse Dance Studio’s teachers and other participants with respect to all illness, disability, death or loss or damage to person or property fully permitted by law.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

**\_\_\_\_\_\_\_ Please check and initial the space to the left to confirm that you fully understand the above.**

**Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Parent or Legal Guardian if under 18 years old**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Thank you for your cooperation and support!**

**Sincerely,**

**DeGrasse Dance Studio**