

# SDA STUDIOS CLASS ENROLLMENT 2019-2020

SDA Levels:    CD-Preschool        Primary        Secondary        Intermediate        Advanced

**Student Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_/\_\_\_/\_\_\_ **Age (on Sept 1):** \_\_\_\_\_  
**Fall Grade:** \_\_\_\_\_ **School Attending:** \_\_\_\_\_ **SDA Level:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_/\_\_\_/\_\_\_ **Age (on Sept 1):** \_\_\_\_\_  
**Fall Grade:** \_\_\_\_\_ **School Attending:** \_\_\_\_\_ **SDA Level:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_/\_\_\_/\_\_\_ **Age (on Sept 1):** \_\_\_\_\_  
**Fall Grade:** \_\_\_\_\_ **School Attending:** \_\_\_\_\_ **SDA Level:** \_\_\_\_\_

**Parent Contact:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Parent email:** \_\_\_\_\_ PRINT CLEARLY PLEASE!

**Dancer email:** \_\_\_\_\_ PRINT CLEARLY PLEASE!

**CLASS CHOICES-PLEASE USE PENCIL ONLY!** example: class times 4-5 class length 1 hr dancer initials-if more than 1 child

**Mon:** \_\_\_\_\_

**Tues:** \_\_\_\_\_

**Wed:** \_\_\_\_\_

**Thur:** \_\_\_\_\_

**Fri:** \_\_\_\_\_

**Sat:** \_\_\_\_\_

**Dancer(s) medical conditions:** \_\_\_\_\_  
 \_\_\_\_\_ (will be kept confidential)

**Total hours per week:** \_\_\_\_\_ (single child)

**Total hours per week:** \_\_\_\_\_ (family)

**Person responsible for tuition payment** (fill in only if different from above contact):

**Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Tuition payment plan:**    \_\_\_\_\_ 6 payments    \_\_\_\_\_ 3 payments    \_\_\_\_\_ 1 payment

**Due per payment:** \$ \_\_\_\_\_ (single schedule)

**Due per payment:** \$ \_\_\_\_\_ (family schedule)

**Registration fee enclosed:**    \_\_\_\_\_ \$35 single child fee    \_\_\_\_\_ \$50 family fee    (fee must accompany this form)

**TOTAL ENCLOSED:** \$ \_\_\_\_\_ (registration fee is completely non-refundable)    **Checks payable to: SDA STUDIOS**

**PARENT SIGNATURE-I understand PAID tuition is non-refundable:** \_\_\_\_\_

STAFF USE ONLY!!	DATE RECIEVED	HOW PAID	AMOUNT	RECORDED BY	REGISTRATION	ROSTER	ATTENDANCE

**STAFF NOTES:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SDA CLASS CHANGE POLICY-READ CAREFULLY & INITIAL ACKNOWLEDGEMENT:** students may add/drop/change classes only at the beginning/end of a 6-week tuition term as follows for 2019-2020:

Trimester 1/Week 1: Aug 26

Trimester 2/Week 1: Nov 18

Trimester 3/Week 1: Mar 2

Trimester 1 Week 7: Oct 7

Trimester 2/Week 7: Jan 20

Trimester 3/Week 7: no changes

Reception/desk staff must be notified in writing in advance to confirm space is available in requested class and obtain instructor approval. **Parent/Guardian Initials:** \_\_\_\_\_ **I understand SDA's class change policy.**

**SOCIAL MEDIA, PHOTO and LIABILITY POLICIES and ACKNOWLEDGEMENT**

**Photo Release:** I hereby grant my consent that photographs and/or video footage of myself/child taken at the studio, in performance, or at any related SDA STUDIOS event, may be used for promotional purposes at any time in the future in print or online.

**Acknowledgement of Risk & Liability Release:** Dance in all forms requires physically demanding movements that carry with them the inherent risk of injury. On behalf of my child/self, I hereby release from responsibility and agree to indemnify and hold harmless SDA STUDIOS (hereafter 'SDA'), their employees, chaperones, agents, landlord, and lessors from any and all claims of liability or negligence in the event of an injury or loss of property sustained while participating in any SDA authorized activity including but not limited to all classes, performances and recitals. I further represent that on behalf of my child/self a physician's consultation has been obtained and the aforementioned is physically capable of participating in all forms of exercise necessary for the instruction of dance. I agree to assume full responsibility for all injuries, medical expenses, damages and/or losses that may be incurred while at or a student of SDA.

**Social Media Policy:** I understand that I/my child do not have permission to reveal any information that might compromise SDA Studios, its staff or students/families on any online site. Personal (student names), proprietary, confidential and/or negative information are not to be posted, nor may I/my child post/speak on behalf of SDA Studios without express written permission from the director. All class work/choreography is copyright protected and owned by SDA Studios, professional photos/videos may not be posted in their entirety without SDA permission.

**Parent/Guardian Acknowledgement (initials):** \_\_\_\_\_ **I have read and understand the above Photo, Liability and Social Media policies.**

**NEW STUDENTS ONLY:** (returning students fill in only if changed)

Address: \_\_\_\_\_

street

city

state

zip

How did you find us?     Internet search     Social Media     Website     Friend     Sign