



REGISTRATION FORM

Dance Dynamix

121 Market Street
Leesburg, Florida 34748

(352) 323-6030

www.dancedynamix.org

Student's Full Name _____ Nickname _____

Age _____ D.O.B. _____ Student's School, if attending _____

Parent/Guardian Name (s) _____

Mailing Address _____ City/State/Zip _____

Home Phone _____ Work _____ Cell _____

Email Address _____

Please list any medical problems or special instructions:

Emergency contact person if parents/guardians cannot be reached:

Name _____ Relationship _____

Home Phone _____ Work _____ Cell _____

Registration fee: \$25.00 per student

Monthly tuition is due on the first lesson of the month, regardless of the student's attendance. Classes begin in September and continue through June. Dance fees are the same every month regardless of the number of weeks in any given month. Payment is due by the 5th of the month. A current credit card number must be kept on file with Dance Dynamix, LLC for the duration of time that the student is registered for classes with Dance Dynamix, LLC. A \$10.00 late fee will be added to payments not received by the 5th of month. Payments not received by the 10th of the month will be automatically deducted from the credit card kept on file with Dance Dynamix, LLC.

A \$25.00 charge will be assessed for any returned checks.

A sibling discount is available of \$5.00 off the monthly tuition per sibling. Please specify this at the time of registration.

How did you hear about us

Returning Student Word of mouth Daily Commercial Internet Other

FOR OFFICE USE ONLY

Class _____ Monthly Tuition \$ _____

Day of Class _____ Time of Class _____



STUDENT/INSTRUCTOR AGREEMENT

Student Name _____

Parent/Guardian _____
(If minor child)

The following terms and conditions are understood and agreed upon between the above named student and/or the parent/guardian of the minor student and Dance Dynamix, LLC.

- In return for course fees, the instructor will give instruction of the registered courses to the above named student.
- The instructor will exercise care and judgment in all matters relating to the instruction, welfare, and safety of the student.
- In case of an accident or illness to the student, the Instructor will promptly take reasonable measures, which in her judgment is in the best interest of the student. The parent/guardian (if minor child) will be notified as soon as possible.
- The student will pay Dance Dynamix the monthly lesson fee on the first lesson of the month, regardless of the student’s attendance. Tuition remains the same each month regardless of the number of weeks in a month. There will be no refunds due to the student missing classes. A 30 day written notice must be given before class cancelation.
- A current credit card will be kept on file for the duration of time that the student is enrolled at Dance Dynamix. Dance Dynamix is authorized to charge any balance on account that is not paid by the 10th of the month.
- If payment is not received by the 5th of the month, a \$10.00 late fee will be added. If payment is not received by the 10th of the month, the balance plus \$10.00 late fee will be charged to the credit card kept on file. A \$25.00 fee will be assessed for any returned checks.
- If extenuating circumstances arise regarding payment, exceptions will need to be arranged with the Instructor.
- The cost of dance shoes, leotards, tights, etc., as well as costumes will be the responsibility of the student and is not included in the tuition fee.
- The instructor reserves the right to dismiss any student who is unable to participate in group experiences or has a behavioral problem that is hindering the proper instruction of other students.
- Dance Dynamix, LLC will not be liable for accidents or illnesses occurring to the student while in its care, unless it can be proven that the accident/illness was a direct result of a laborer’s negligence.

Both parties, Dance Dynamix, LLC., and the Student/Parent/Guardian, understand and agree that this Agreement is a contract binding for both parties and may be terminated by either part at any time, upon notification.

Signature (Parent/Guardian - if minor child)

Date

Terri Hicks, Owner/Instructor

Date

Credit Card # _____ Expiration _____ Security Code _____

Name on Card _____ Zip Code _____