

The Vibe Dance Center's Registration Form

Parent Name _____ Hm Phone: _____ Cell: _____

Street Address: _____ City _____ Zip _____

Student's Name _____ DOB _____ Age _____

Student Cell _____ School Attending _____

Parent Email _____

Any Medical Conditions? _____

Emergency Contact _____ Phone _____ Relation _____

Class (es) Registering For:	Day	Time	Length

****First months tuition is due at time of registration****

Total Hours _____

(For tuition table refer to the schedule and/or website)

Total Monthly Tuition _____

****PLEASE COMPLETE THE MONTHLY AUTO-PAY FORM**

How did you hear about us? _____

Parent Initials:

_____ **I understand and have read the new tuition schedule.**

_____ **I understand that tuition is due by the 1st of each month.**

_____ **I understand that a \$10 late fee will be automatically applied to my account on the 5th.**

_____ **I understand that there is a \$20 fee assessed to all NSF returns.**

_____ **I understand that The Vibe Dance Center does not send monthly invoices. Invoices are only sent to delinquent accounts when the \$10 late fee is assessed.**

I _____ agree to release The Vibe Dance Center LLC and it's owners and/or employees from any and all liability for personal injury which may occur during classes, performances or any other activities on or off location, and I agree to waive all claims against injury, damage, or loss to bodily or personal articles while I am in direct participation with The Vibe Dance Center. I have read and understand all policies regarding the studio, classes and tuition.

Parent/Legal Guardian Signature _____ **Date** _____

(Dancer signature if over 18yrs old)