# *Jenny's Dance Centre* Summer 2011 Registration Form

_____ _____/_____/_____
Student's Name Student's Date of Birth

_____ _____
Address Parent's First Names

_____ _____
City State Zip Code Parent Email Address

_____|_____
Home Phone # Cell Phone #

| Class Name | Day/Time | Class Code | Class Length |
|---|---|---|---|
| | | | 45-60 or 75-90 |
| | | | 45-60 or 75-90 |
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| | | |
|---|---|---|
| 1 class | $150 | **75-90 MINUTE CLASSES** |
| 2 classes | $294 | $52 Additional For Each Class |
| 3 classes | $432 | **SUMMER REGISTRATION FEE** |
| 4 classes | $564 | $10 |
| 5 classes | $690 | **PRE-JAZZ & PRIMARY** |
| 6 classes | $807 | $75 (meets once per week) |

**SUMMER INTENSIVE PROGRAM Mon-Thurs July 11-29**
All 3-weeks - $792.00 One or two weeks - $300.00 per week

Total Classes _____ Tuition from above $_____

75-90 Min. Classes _____ X $52 $_____

Summer Intensive $_____

Summer Registration Fee $ 10

Subtotal $_____

Less 5% Early Bird Discount – not valid after May 13th $_____

Subtotal $_____

3% Processing fee if paying by credit/debit card $_____

Authorized Amount $_____

We do not call to confirm your class selection. We will only call if you are wait listed

**You may register at any time by:**

Mail Jenny's Dance Centre or Fax 847-295-9436
PO Box 6564
Libertyville, IL 60048-6564 or Studio Drop Box

**You may pay by:** Discover MC Visa Check ($25 charge for returned checks)
A 3% processing fee will be added to all credit/debit card orders.

_____-_____-_____-_____ ____/____ _____
Credit Card Number Exp. Date Security Code

_____ _____
Authorized Signature Date

**WAIVER & RELEASE:** I fully understand that Jenny's Dance Centre, Inc. staff members are not physicians or medical practitioners of any kind. With the above in mind, I hereby release Jenny's Dance Centre, Inc. staff to render temporary first aid to my child in the event of an injury. If deemed necessary by Jenny's Dance Centre, Inc. staff can seek medical help, including transportation by Jenny's Dance Centre, Inc. staff member and or it's representatives, whether paid or volunteer, to any health care facility or hospital, or the calling of an ambulance for said child.
Parents should make their children aware of the possibility of injury and encourage their children to follow all the safety rules and the teacher's instructions. Jenny's Dance Centre, Inc., and it's staff members will not accept responsibility for injuries sustained by any student during the course of dance, competition or recital in which he or she may participate or while traveling to or from an event.
With the above in mind, and being fully aware of the risks and possibility of injuries, I consent to have my child or children participate in the programs offered by Jenny's Dance Centre, Inc. I, my executors or other representatives, waive and release all rights and claims for damages that I or my child may have against Jenny's Dance Centre, Inc. and or it's representatives, whether paid or volunteer. I also affirm that I now have and will continue to provide proper hospitalization, health and accident insurance coverage which I consider adequate for both my child's protection and my own. I also understand that it is the parents' responsibility to warn the child about the dangers of dance. The parent should warn the child according to what the parent feels is appropriate. Jenny's Dance Centre, Inc. will only ward the child through Safety Messages and our teaching style and progressions.

**REFUND POLICY:** No refunds will be given after **June 10, 2011**. No intensive tuition refunds after **June 27, 2011**. There will be a $50 service fee charged for each class /intensive week refunded before the dedline. $25 service fee on refund requests for pre jazz & primary levels before the deadline.
**CREDIT POLICY:** Credit towards future tuition will be considered if a student suffers a serious injury or illness. Requests for medical credit must be made in writing and be accompanied by a physician's certificate. Credit is valid only for the student to whom it is issued.

I agree to all of Jenny's Dance Centre, Inc. policies.

_____ _____
Parent or Legal Guardian Signature Date

Please check if applicable to your child: ☐ Attention Deficit Disorder ☐ Learning Disability