

# The Putnam Dance Center

# Registration Form

554 Liberty Highway, Putnam, CT 06260 | 860-963-7073 | putnamdanceinfo@gmail.com

Please **PRINT** the information below and return it to the studio **with your NON-REFUNDABLE registration fee.**

For further information or to request additional forms, please contact the studio.

**I, the parent/guardian of the below named student(s), a minor, and the below named student(s) agree to the following:**

1. \_\_\_\_\_  
Guardian Initial

**1. PHOTO RELEASE:** I give full rights to The Putnam Dance Center and its staff to use photos and video images of me or my child to use for promotional purposes for The Putnam Dance Center's use only. Photos and videos may be used in brochures, websites, advertisements, and other promotional material created by the studio. Photos may appear with or without names in press releases and other print advertising. I acknowledge that by signing this form, I agree to the terms listed above and I give The Putnam Dance Center full copyright and authority to publish photography.

**\*\*Due to the increased use of social media, please do not post ANY photos taken of The PDC students without permission from the Director and Assistant Director\*\***

**2. STUDIO POLICIES:** By signing and initialing this Registration Form, I have read, understand, and will abide by the Policies of The PDC.

2. \_\_\_\_\_ 2. \_\_\_\_\_ 2. \_\_\_\_\_ 2. \_\_\_\_\_  
Student 1 Initial Student 2 Initial Student 3 Initial Guardian Initial

3. \_\_\_\_\_  
Guardian Initial

**3. LIABILITY WAIVER:** I understand and agree that in participating in any dance class, workshop, rehearsal or performance, there is a possibility of physical injury or death. I voluntarily agree, therefore, to assume all risks and responsibility for any such injury or accident, which might occur to me or my child during any of The Putnam Dance Center's classes, rehearsals, performances, or activities. I also exempt, release, and indemnify The Putnam Dance Center, it's owner, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students from any and all liability claims, demands, or causes of action whatsoever. This may be from any damage, loss, injury, or death to me, my children, or property which may arise out of or in connection with participation in any classes or activities conducted by The Putnam Dance Center. I further hereby voluntarily agree to waive my rights and that of my heirs and assigns to hold The Putnam Dance Center, it's owner, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students liable for such damage, loss, injury, or death. I understand that I should be aware of my physical limitations and agree not to exceed them. Upon signing this waiver for my children, I certify that I am the parent or legal guardian and have the authority to waive these rights.

## \*Student Information\*

Signature: \_\_\_\_\_

**Student #1 Name:** \_\_\_\_\_ Student Cell#: \_\_\_\_\_

Student Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

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

Any **ALLERGIES**/medical conditions or diagnosis you would like us to know about? \_\_\_\_\_

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Years Dancing at The PDC: \_\_\_\_\_  
(Including this year)

**Student #2 Name:** \_\_\_\_\_ Student Cell#: \_\_\_\_\_

Student Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

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

Any **ALLERGIES**/medical conditions or diagnosis you would like us to know about? \_\_\_\_\_

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Years Dancing at The PDC: \_\_\_\_\_  
(Including this year)

**Student #3 Name:** \_\_\_\_\_ Student Cell#: \_\_\_\_\_

Student Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

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

Any **ALLERGIES**/medical conditions or diagnosis you would like us to know about? \_\_\_\_\_

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Years Dancing at The PDC: \_\_\_\_\_  
(Including this year)

**\*Parent/Guardian Information\***

**Emergency Contact:** \_\_\_\_\_ Cell phone: \_\_\_\_\_

**Parent #1/ Guardian:** \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email **\*\*REQUIRED\*\***: \_\_\_\_\_

Mailing Address (If different than student): \_\_\_\_\_

**Parent #2/ Guardian:** \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email **\*\*REQUIRED\*\***: \_\_\_\_\_

Mailing Address (If different than student): \_\_\_\_\_

- By signing here, I agree to be the sole financial responsible party to the PDC:  
Print name: \_\_\_\_\_ *Signature required to enroll student(s)\**: \_\_\_\_\_
- Separate payment accounts may be granted. However, any past due accounts in regard to the dancer(s) will be communicated only through the above party who would be required to fulfill the amount due if payments are not being made.

Dancer	Day	Class	Time	Costume (X)	Teacher	Length of Class

**# of Costumes: \_\_\_\_\_ @ \$55/costume *deposit* due Nov 10<sup>th</sup> 2019: \$ \_\_\_\_\_.**  
***Final Costume Balances (FCB) will be billed by February 29<sup>th</sup>, 2020. Payment is due March 10<sup>th</sup>.***

Total Hours	Yearly	Quarterly	Monthly
1 <sup>st</sup> Child:	\$	\$	\$

With 20% sibling discount

**\*Totals All Children\***

2 <sup>nd</sup> Child:	\$	\$	\$
3 <sup>rd</sup> Child:	\$	\$	\$
4 <sup>th</sup> Child:	\$	\$	\$
<b>Totals:</b>	\$	\$	\$

Monthly (No %): \$ \_\_\_\_\_

Quarterly w/ 5 %: \$ \_\_\_\_\_

Yearly w/ 10%: \$ \_\_\_\_\_

**REGULAR TUITION**

**Registration Fee (Non-refundable):** (Circle one) Discount applies to siblings/dancers from the same immediate family  
 1 student \$15      2 students \$25      3+ students \$35

**Payment Plan:** Choose payment plan (Initial ONE)  
**FIRST PAYMENT MUST BE MADE WHEN REGISTERING**

\_\_\_\_\_ **Year in Full** (w/10% discount if received by September 1<sup>st</sup>, 2019) \$ \_\_\_\_\_ (amount)  
 Initial \_\_\_\_\_

\_\_\_\_\_ **Quarterly payments** (w/5% discount if received by Sept-Nov-Jan-March 10<sup>st</sup>, 2019) \$ \_\_\_\_\_ (amount)  
 Initial \_\_\_\_\_

\_\_\_\_\_ **Monthly payments** (No discount, due by the 10<sup>th</sup> of the month) \$ \_\_\_\_\_ (amount)  
 Initial (May payment due at registration. Sept. payment due Sept. 10<sup>th</sup>. Last monthly payment is April 10<sup>th</sup>)

**\*A \$20 Late Assessment Fee will be applied to your account  
 if payment has not been by the 15<sup>th</sup> of that month.\***

**\*\*\*\*\* REQUIRED \*\*\*\*\***

MC/Visa/Disc/Amex Account # \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
 Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

**Authorization to Run Credit Card for Monthly or Quarterly Tuition:**

I, \_\_\_\_\_ (print name) give my permission for The Putnam Dance Center to run my credit card for the purposes of paying monthly tuition due on the 10<sup>th</sup> of each month OR quarterly tuition due by the 10<sup>th</sup> of September, November, January, and March. Card will be processed 1<sup>st</sup> week of the month.

Signature: \_\_\_\_\_

**TUITION:** Please refer to our tuition fees located on the back of the dress code sheet.

- In the event your account is 30 days past due, that amount (with the late assessment fee) will be charged to your credit card. This includes costume deposits not paid by November 15<sup>th</sup>. This information is kept completely confidential and will only be used after a phone call is made to you personally.
- Tuition payments can be made by check, cash, money order, or credit card. We accept Visa, Mastercard, Discover, and American Express. Tuition adjustments will be made if your dancer has a change in scheduled class hours.
- A \$25.00 service fee will be added to your account for each returned check.

**~ OFFICE USE ONLY ~**

Balance from previous year: \$ \_\_\_\_\_ Credit from previous year: \$ \_\_\_\_\_

Registration: (circle one)      1 Student    2 Students    3+ Students      \*MUST BE PAID AT TIME OF REGISTRATION\*

\$15            \$25            \$35

Total Payment received:

1. Cash: \$ \_\_\_\_\_ 2. Check: \$ \_\_\_\_\_ (Check #: \_\_\_\_\_ ) 3. MC/Visa/Disc/Amex: \$ \_\_\_\_\_

Staff Initials: \_\_\_\_\_ Date: \_\_\_\_\_

B/O	Rec	Dancewear	Price	Tax	Total Price

Additional notes:

\_\_\_\_\_

\_\_\_\_\_