



South Hills Dance Academy

5408 Clairton Blvd. Pittsburgh, PA 15236

www.southhillsdanceacademy.com

2017-2018 Registration

Student's Name: _____ Age (as of 9/1/17): _____

Parent's Name: _____ Parent's Phone #: _____

Parent's Email: _____ Alternate Phone #: _____

(Please note: Email address provided will be used for studio communications)

Address: _____

Academic School: _____ Grade (as of 9/1/17): _____

Emergency Contact Name: _____ Emergency Contact Phone #: _____

Previous Dance Experience:

Studio Name: _____ Number of Years Experience: _____

How did you hear about us: _____

Allergies/Medical conditions (if any): _____

To be filled out by South Hills Dance Academy:

Classes (Level & Date/Time): _____

Registration Fee: _____ Payment Type: _____ Payment Date: _____

Tuition Payments

Month	Payment Amount	Payment Type	Date
September			
October			
November			
December			
January			
February			
March			
April			
May			
June			

South Hills Dance Academy

Release from Liability and Payment Terms

I, _____ (parent/guardian's name) hereby give myself or my child
, _____ (child's name) permission to dance at South Hills Dance Academy. I understand that I am enrolling myself or my child in dance classes where injury may take place. With an understanding of the risks associated with the activity of dance, I knowingly and voluntarily waive the right to any legal action against South Hills Dance Academy due to any injury on studio property or during rehearsals and performances within the community.

I understand that tuition is due on the first of the month and that a late fee of \$15 will be applied to tuition paid after the 10th of the month for any reason. June tuition must be paid in full by June 9, 2018 in order to participate in the Academy Showcase at the end of the season. I understand that tuition is non-refundable and will not be reduced based on classes attended.

Parent/Guardian Signature

Date

Participant's Name

Date

Photo and Video Release

I give South Hills Dance Academy permission to take and use photos and videos of myself or my child in any form of advertisement or record keeping for South Hills Dance Academy.

Parent/Guardian Signature

Date

Participant's Name

Date