



DANCE ARTS ACADEMY

2022-2023 Main Dance Program Registration Form

Student Name: _____
Current Age: _____ Date of Birth: _____ Grade: _____
Parent/Guardian Name: _____
Mailing/Billing Address: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Cell Phone: _____
Email Address: _____
Any known allergies or restrictions for your dancer?

2022-2023 Main Dance Program (Please include class days and times):

1. _____
2. _____
3. _____
4. _____

Total Monthly Tuition: _____
Registration Fee (\$15 per dancer/\$25 family fee): _____
Total: _____

ALL families will need to provide a credit card to keep on file for the year. IF you would like your tuition automatically billed the **FIRST** week of each month, September 2022 to June 2023 please note that here. A 5% convenience fee will be added to each card transaction - PayPal is the processor.

Mastercard – VISA – Discover – AMEX and Card #: _____
Exp Date: _____ CCV Code: _____ Billing Zip: _____
Authorization Signature: _____

Hold Harmless - Liability Disclaimer & Media Release:

Dance Arts Academy, LLC and its staff, faculty, guest instructors, etc. are NOT liable for personal injuries, loss or damage to personal property. Since dance is a physical activity, injuries may occur. It is the parent/guardian responsibility to inform staff & teachers of any physical limitations of any child. DAA and its staff & affiliates are NOT held liable for any injury or illness (including COVID) that might occur while on the physical property or on any DAA sponsored trip, class, workshop, competition, convention, etc. I give permission for my child to be used in nameless pictures and/or videos for Dance Arts Academy, LLC for printed or online advertising, etc. Should we need to return to ZOOM classes – I give my permission for my child to participate and potentially be in a recorded class. Registration fees for 2022 are due at the time of registration – monthly tuition is due no later than the 10th of the month – late fees will apply. Registration fees, monthly tuition, costume fees, etc. are NON-refundable. I have read and understand the information regarding fees, tuition, liability, photo & video use for media purposes, etc.

Parent Printed Name: _____

Signature: _____

OFFICE USE: Total PMT: _____ PMT Method: _____ Date of PMT: _____ Staff Initial: _____

PRIVATE & CONFIDENTIAL FORM – Mail to Dance Arts Academy, PO Box 2569, New London, NH 03257