

Student's Name _____

DATE: _____

PARENT / GUARDIAN INFORMATION

| | | |
|---------------|---------------|---------------|
| Name(s) : | | |
| Address: | City: | Zip: |
| Home Phone: | Cell Phone 1: | Cell Phone 2: |
| Work Phone 1: | Work Phone 2: | Email: |

STUDENT INFO

| | |
|--|-----------------------------------|
| Birth Date: | Student's School which Attending: |
| Medical conditions/allergies/medications/ or physical limitations: | |

How did you hear about Route 42?

Current Student

Friend

Postcard

Flyer

Web

Other

PAYMENT

To reserve your class, this form must be accompanied by the non-refundable registration fee of \$20 per child or \$30 per family.

| | |
|--|-------------|
| Registration — Date Paid: | Total Paid: |
| Method of Payment: <small>Check Number:</small> <input type="checkbox"/> <small>Credit Card</small> <input type="checkbox"/> <small>Cash</small> <input type="checkbox"/> <small>(Admin Use Only) Tuition Payment Option Plan:</small> _____ | |

Class Selections

| | | | |
|--------|------|--------|------|
| Class: | Day: | Class: | Day: |
| Class: | Day: | Class: | Day: |
| Class: | Day: | Class: | Day: |
| Class: | Day: | Class: | Day: |

I am interested in performance team information

ASSUMPTION OF RISK, RELEASE AND WAIVER LIABILITY

By signing this form, I understand that there are incumbent risks associated with participation in dance. These include, but are not limited to, sprains, pulled muscles, and broken bones. Participation indicates the acceptance of such risks and I assume all risks and hazards incidental to dance training, performances and Studio related activities & events. I hereby release and agree to hold Route 42 Dance Academy & JNH Productions LLC, its employees, officers, agents, contractors, and owners, harmless from any liability, injury, damage, causes of action, debts, claims and demands of every kind of nature whatsoever which now have, or may arise from, or in connection with Route 42 Dance Academy activities. The terms of this agreement shall also serve as a release and assumption of risk by my heirs, executors and administrators and for all members of my family.

(continued next page)

Route 42 Dance Academy - JNH PRODUCTIONS LLC

Registration Year 20_____

I further agree that this release and assumption of risk agreement and waiver liability is intended to be as broad as permitted under Ohio Law, and that if any portion thereof is held invalid, it is agreed that all other portions shall continue in full legal force and effect. I have read and confirmed the accuracy of the information provided on this page.

Photographs, recordings, taping or filming of students by any and all staff members, agents of Route 42 Dance Academy, or members of the press, become the property of Route 42 Dance Academy and JNH Productions, and may be used for publicity or resale. By signing, the parent(s) and or guardian(s), expressly adopts and agrees to be bound by the above waiver and release agreement. I have read, understand, and agree to the terms listed above, and sign this document voluntarily.

Printed Name _____ Signature _____ Date _____

In the event that my child becomes ill or injured and I cannot be reached, I hereby consent to any emergency medical treatment that may be deemed necessary by a physician. I represent that the information given here is correct and that my child has my full consent to participate in the classes at Route 42 Dance Academy. I do hereby agree to comply with the requirements, policies, and regulations, which have been established by Route 42 Dance Academy.*

Printed Name _____ Signature _____ Date _____

***If you choose to not sign the emergency medical release, the student's parent or legal guardian must be present while child participates in all or any activities of Route 42 Dance Academy. _____ (Initial)**

*** There is a \$15.00 Late Fee for all payments received the after *Due Date Window*, and is applied automatically. Each *Due Date Window* ends once the 1st of the next month arrives (10 Installment Payment Plan). Half Year and One/Third Year plans become late once the due date has passed.

*** There is a returned check fee of \$30.00.

Payments Accepted: Cash, Check, Money Order, all Major Credit Cards. Please make checks payable to Route 42 Dance Academy

A one month written *Notice of Intention to Withdraw* is due before the 20th of the month, and is required to discontinue any classes to release parent from Full Year Tuition Liability. No withdrawals will be accepted after February 1st on a recital year. *Withdrawal Non-compliance results in Full Year Tuition Balance Due immediately.* To complete a withdrawal procedure, and to avoid an account being transferred to a Collection Bureau, a parent or adult student must: inform school administration in person, and complete and sign a Withdrawal Form provided by the school office.

Route 42 Dance Academy reserves the right to terminate lessons with any student without notice. In such cases a refund for unused lessons will be issued. **By signing this document, you acknowledge that you understand Route 42 Dance Academy's financial policy.**

SIGNATURE _____ DATE _____

Thank you