

STAR PERFORMANCE DANCE ACADEMY

1381 OLD RT. 220 NORTH, SUITE 11

DUNCANVILLE, PA 16635

814-695-5280

Student Name:		DOB:
Address:		
City:	State	Zip
Tel #1	Tel #2	
Email:		
Name: Parent/Guardian #1		
Name: Parent/Guardian #2		
In case of emergency, please notify		
Emergency telephone		
Student's age (as of 9/1)	Grade (as of 9/1)	
Previous training? Please list past experience in dance (include styles of dance and number of years)		
Name of previous dance school:		
Any health or physical restrictions?		
Which days of the week would you prefer that your child attend classes? (We will schedule your selected day if possible)		
Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Any day <input type="checkbox"/>		

Parents please read carefully: I am aware that dancing, and the exercises associated with it, place unusual stresses on the body, and carry with them the risk of physical injury. On behalf of my child and myself (and if I am no longer a minor, on my own behalf), I assume the risk and agree that Star Performance Dance Academy shall not be liable in any way for injuries sustained during attendance at Star Performance Dance Academy or any of its related functions. I grant my child, or ward, permission to participate in the Star Performance Dance Academy sessions. I hereby release and discharge Star Performance Dance Academy, its agents, employees, and officers from all claims, demands, actions, judgments and executions or claim to have against Star Performance Dance Academy for all personal injuries caused by, or arising from, the above described activities, or any activities related thereto.

Further, I grant Star Performance Dance Academy, its agents and employees, permission to authorize any emergency medical treatment that may be required for my child. I, the undersigned have read this authorization and the policies of Star Performance Dance Academy and understand all of its terms. I execute it voluntarily and with the full knowledge of its significance.

Signature of Student

Date

Signature of Parent/Guardian if student is minor

Date

Photo Release

I hereby give permission for Star Performance Dance Academy to use photographs/videos of my likeness in Star Performance Dance Academy sponsored publications and for promotional purposes.

Signature of Parent

Date



Class Times:

Please check each class you wish to attend

EACH STUDENT WILL BE PLACED INTO LEVELS BY AGE, ABILITY OR EXPERIENCE

Mommy & Me classes	30 min.	<input type="checkbox"/>
Combination Class**(Ballet/Tap) Age 4 to 7	1 hour	<input type="checkbox"/>
Miini Dance Camp -Ages 3 & 4	1 hour	<input type="checkbox"/>
Ballet-ages 8 & up		
Beginner/Intermediate	45 min.	<input type="checkbox"/>
Advanced Ballet (by instructor placement)	1 hour	<input type="checkbox"/>
Pointe-Beginner (instructor placement only)	30 min.	<input type="checkbox"/>
Pointe-Intermediate/Advanced (instructor placement)	45 min.	<input type="checkbox"/>
Lyrical-ages 7 & up	45 min.	<input type="checkbox"/>
Liturgical -Ages 7 & up	45 min.	<input type="checkbox"/>
Tap- ages 8 & up	45 min.	<input type="checkbox"/>
Hip/Hop with Brandon (7-9 yr olds)	45 min.	<input type="checkbox"/>
Hip/Hop with Brandon (10-12 yr olds)	45 min.	<input type="checkbox"/>
Jazz/Hip-Hop		
Ages 4-6	30 min.	<input type="checkbox"/>
Ages 7-9	45 min.	<input type="checkbox"/>
Ages 10 & up	1 hour	<input type="checkbox"/>
Acro/Tumbling (age 5 & up, see policies)	45 min.	<input type="checkbox"/>
Leaps, Jumps, Turns & Flexibility (company members)	1 hour	<input type="checkbox"/>

** Ballet or tap can be taken separately as a 1/2 hour class.

	Tuition Per Student/Month	
	1st class	Each Additional Class
One Hour Class	\$32.00	\$22.00
45 minute Class	\$28.00	\$20.00
30 Minute Class	\$24.00	\$18.00
Unlimited Classes*	\$100.00	

*Does not include competition fees

Registration Fee (\$15.00 per family)	\$ 15.00
Monthly Tuition (For first class highest price prevails)	_____ 1st Class
	_____ 2nd Class
	_____ 3rd Class
	_____ 4th Class
Competition Fees	_____
Sibling discount*	_____
TOTAL	_____

***Each sibling of an enrolled student will receive a \$5.00 discount per month. Sibling discounts do not apply when paying for the entire year upon registration.**