**Cosmic Movement Dance Academy**

**2024-2025 Registration Form**

\*Please email form to cosmicmovementdance@gmail.com

Students Name (First and Last):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthdate (MM/DD/YYYY):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Name/s:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Email Address/s:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact #1 (Name/Relation/Phone Number):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact #2 (Name/Relation/Phone Number):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any health, development, or learning disabilities our staff should be aware of?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Individual/s Responsible for Tuition:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payment Method (Cash/Card/Check/Venmo): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payment In Full or Monthly: \_\_\_\_\_\_\_\_\_\_\_\_

\*Registration Fee: $20 for one student; $40 for 2 or more students

Please indicate the class or classes the student will take (day and time):

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tuition Per Month/Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*\*Please read before signing\*\*\*

I, the parent/guardian of the participant listed above or I, the participant, understand Cosmic Movement Dance Academy, LLC, its teachers, and studio are not responsible for injuries sustained during class, rehearsal times, or performances to the participant listed above. Cosmic Movement Dance Academy, LLC, and its teachers are also not responsible for any lost or stolen items, or the supervision of my child outside of the studio, recital, or competition buildings. Registration fee and 1st month tuition are due at the time of registration. Tuition is due on a monthly basis (September through May, by the 5th of every month) or paid in full at the start of the fall season. One reminder email will be sent at the beginning of the month. All late tuition payments will receive an email with a late fee of $10 added to the tuition price. A fee of $20 will be added to any bounced checks. I understand that all payments are non-refundable and that until registration is submitted, and tuition is paid students are not guaranteed a spot in their selected class. It is the parent’s responsibility to notify the studio of any class/classes the student drops. I give permission to Cosmic Movement Dance Academy, LLC to take photos and videos of me or my child for marketing and promotional purposes. This signature indicates I have read, understood, and plan to follow Cosmic Movement Dance Academy, LLC’s policies.

Parent/Guardian Signature:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Were we referred to by someone? If yes, by who?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_