



Phone: 720-283-8000
Email: info@inspirationsdanceco.com

Dance Company & Performing Arts

DANCE • MUSICAL THEATER • MUSIC

250 East Dry Creek Unit 105
Littleton, CO 80122

Page 1 Registration

Mother's Name _____ Fathers Name: _____ Address _____
City _____ Zip _____
Primary Home Ph. _____ Primary Cell Ph. _____

Email Address (required for class updates & billing info): _____
How did you hear about us? _____

Student Information:

Student #1

Name: _____ M / F: _____ Age: _____
DOB: _____

Student #2

Name: _____ M / F: _____ Age: _____
DOB: _____

Please list any physical and/or social conditions that may affect your child's performance in class, or that might be needed in the event of emergency medical attention being required (significant past injuries, allergies, fears, etc.) _____

Please list any physical and/or social conditions that may affect your child's performance in class, or that might be needed in the event of emergency medical attention being required (significant past injuries, allergies, fears, etc.) _____

Class/es your child is registering for:

Class Name: _____ Day/Time: _____ -
Class Name: _____ Day/Time: _____ -
Class Name: _____ Day/Time: _____ -
Class Name: _____ Day/Time: _____ -

Class/es your child is registering for:

Class Name: _____ Day/Time: _____ -
Class Name: _____ Day/Time: _____ -
Class Name: _____ Day/Time: _____ -
Class Name: _____ Day/Time: _____ -

please use the back of this page to list more than 4 classes

***Required* Credit Card # _____ MC Visa Discover Exp. _____**

A credit card is required on all accounts. Please note the credit card on file will be charged if payment is not received by the 5th of each month.

_____ Please charge my card on file \$ _____ per month on the 1st of each month as automatic payment for 2010-11 dance year.

_____ Please charge only my registration fee to my credit card.

_____ Please charge the amount of \$ _____ as monthly payment towards my 2011 recital costume and/or Company Competition Fees.

\$70 per combo class, \$60 per class on all other classes. May divide up to 3 monthly payments.

Signature: _____

Emergency Information:

• Families primary accident/medical insurance carrier _____

• Please list a contact person(s) in the event you can not be reached in an emergency situation:

Name _____ Ph. _____ Relation: _____

Name _____ Ph. _____ Relation: _____

Insurance Carrier: _____

Initial Below:

_____ (init) I understand that tuition is due in full on the 25th of the previous month and considered late after the 5th, and due to that fact IDC does not send invoices via US Mail. I understand my credit card listed above will be charged if payment is not made by the 5th. If my credit card is declined and I have not made other arrangements by the 5th a \$20 late fee will be added to my account will be charged in accordance with the IDC tuition policy.

_____ (init) I understand that although IDC's tuition is charged monthly, enrollment is continuous August-June until I provide the proper **two week** written notice per IDC's enrollment & class drop policy, and that I am responsible for the monthly tuition through the end of such notice time.

_____ (init) I understand that if my tuition is late and not received by the 25th of the month my child is automatically removed from his/her class. No attendance is allowed until my balance is paid in full including late fees.

_____ (init) I understand that IDC does not prorate or refund any charges due unless specifically identified as an exception in the IDC Proration and Refund Policy.

_____ (init) I understand that should I continuously be late to pick up my child from their class, IDC may charge me fees in accordance with IDC's Drop-Off & Pick-Up Policy.



Phone: 720-283-8000
Email: info@inspirationsdanceco.com

Dance Company & Performing Arts

DANCE · MUSICAL THEATER · MUSIC

250 East Dry Creek Unit 105
Littleton, CO 80122

_____ I hereby permit Inspirations Dance Company, LLC to use pictures taken in class or at performances, in which myself/or my child may appear in a slide show of the annual recital and/or for purposes of communications and literature about our dance studio.

Risk and Liability Statement : The applicant hereby: (1) releases and agrees to hold harmless Inspirations Dance Company, LLC from any loss or damage to undersigned's property or any personal injury which he/she may sustain while setting up for, participating in, or in conjunction with Inspirations Dance Company, LLC, and (2) agrees to indemnify and to hold harmless the Inspirations Dance Company, LLC (including its court costs and attorneys' fees) from any loss or damage to any property of, or any personal injury to, any third party caused by reason of any negligent or intentional act or omission by applicant while setting up for, participating in, or in connection with Inspirations Dance Company. The term "applicant" as used herein shall include the applicant individual, partnership, corporation and/or any other legal entity in any of its or their variations, and applicants' officers, agents, employees, contractors, heirs, successors, alter egos and assigns.

Child/Children's Full Name: _____

Parent/Legal Guardian Name (Please print): _____

Parent/Legal Guardian Signature: _____