

Center Stage Dance Academy, LLC
Returning Student Registration Form
Check the classes you are registering for below.

Student Name: _____
First Last

- | | |
|--|---|
| ☐ Ballet & Tap Combo (ages 2-5) | ☐ Tap (ages 8 - up) |
| ☐ Jr.Acro Jazz (ages 4-5) | ☐ Jazz (ages 8 - up) |
| ☐ Ballet (ages 6-7) | ☐ Hip Hop (ages 8 - up) |
| ☐ Tap (ages 6-7) | ☐ Acro Jazz (ages 8 - up) |
| ☐ Pre-Jazz (ages 6-7) | ☐ Musical Theater (ages 9 -up) |
| ☐ Hippity Hop (ages 6-7) | ☐ Conditioning (ages 9 -up) |
| ☐ Lyrical Ballet (ages 8 - up) | ☐ Solo/Duo/Trio |

Allergies/Medical Condition:

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Center Stage Dance Academy, LLC

Parent/Guardian Contract

Allergies/Medical Condition:

- I agree to pay the entire tuition of the classes for which I have registered my child/children.
- If the state closes us down for Covid-19, I understand that tuition still must be paid for on-line classes.
- I understand that a refund may be made ONLY for a prolonged illness or severe injury verified by physician's certification.
- I will pay for all costumes ORDERED if my child withdraws from Center Stage Dance Academy.
- I will support my child's/children's dance teachers and resolve to allow them to manage the dancers and choreography as they feel benefits the entire class.
- I will not make disparaging remarks of any type with regards to teachers, dancers, choreography, costumes, and other parents in the academy or on social media during the course of any event at any time.
- I agree to hold Center Stage Dance Academy and its staff harmless for any injuries I or my child may sustain as a result of participation in Center Stage Dance Academy classes or activities.
- I realize that my child or I may be removed from any dance event or from attending Center Stage Dance Academy for failure to comply with the statements above.

I, _____ understand completely the requests of
(Print Name)

Center Stage Dance Academy as stated above. My child/children also understand all of these requests and we agree to abide by all.

Parent/Guardian Signature: _____

Date: _____