



4235 SW High Meadow Avenue, Palm City, FL 34990  
772-220-6694 – 772-220-1882 (Fax) – [www.onpointedancestudio.com](http://www.onpointedancestudio.com)

## 2009 / 2010 Adult Registration Form

**Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip code:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Business Telephone Number:** \_\_\_\_\_ **Cell Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Business Telephone Number:** \_\_\_\_\_ **Cell Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Previous Dance Classes Attended:** \_\_\_\_\_ **Dates:** \_\_\_\_\_

\_\_\_\_\_ **Dates:** \_\_\_\_\_

**Emergency Contact Name/Phone:** \_\_\_\_\_

**Doctor's Name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**Medical Insurance Carrier:** \_\_\_\_\_

**Medical Information in Relation to Physical Activity:** \_\_\_\_\_

\_\_\_\_\_

**Enrollment (Initials)** \_\_\_\_\_

**Tuition is due at the first class meeting, in advance. Adult Ballroom/Ballet/Modern/Tap classes are \$50.00 per person, per month. This amount entitles the student to 4 one hour sessions within that month. If there are any questions or changes in reference to your account, please contact Nancy Fleming, at 772-220-6694.**

**Registration fee is \$25.00**  
**Registration fees are non-refundable and non-transferable**

**Classes Registering for:**

1. \_\_\_\_\_
2. \_\_\_\_\_

We, the staff at On Pointe Dance Studio, Inc, recognize our obligation to make sure our students are aware of the risks and hazards involved in the sport of dance. By signing this waiver, you do hereby enroll, in the program, and do release On Pointe Dance Studio, its staff, instructors and other personnel, from all claims or liabilities, on account of any injury or accident occurring or arising from the instructional program or sponsored activities, either on or off premises, which may be sustained by you while attending any dance class, event associated with On Pointe Dance Studio, or outside performances.

I also affirm that I now have and will continue to carry proper primary medical, health, hospitalization and accident insurance, which I consider adequate for the protection of both myself and On Pointe Dance Studio, Inc.

I do authorize emergency first aid care, by On Pointe Dance Studio, Inc, in the event I become injured or ill during instructional program or incidental sponsored activities either on or off premises. If the emergency contacts are not immediately available, at the telephone numbers provided in the agreement, I further authorize On Pointe Dance Studio, Inc, or such agents as they may authorize to retain the services of a doctor or other competent medical person in order to treat the said minor.

I do realize that I must comply with reasonable operating procedures set by On Pointe Dance Studio, Inc, for the conduct of instructional programs and incidental activities, either on or off the premises. I understand that violations of said operating procedures may be the basis for termination of this Agreement.

**On Pointe Dance Studio, Inc., is registered with the State of Florida as a Ballroom Dance Studio. Registration #DS675.**

This contract may be cancelled within 3 days, exclusive of holidays and weekends, of its making, upon the mailing or delivery of written notice to On Pointe Dance Studio, Inc. On Pointe Dance Studio, Inc. will refund, upon such notice, all moneys paid under the contract, except the amount for dance studio services or lessons actually rendered during the number of days prior to the cancellation notice. A refund shall be issued within 10 days after receipt of the notice of cancellation, made within the 3 day notice.

If the student becomes physically or mentally unable to avail him/herself of the dance studio lessons or services, after 3 business days and release from further payments upon notice of cancellation. After three business days, On Pointe Dance Studio, Inc. shall charge only for the dance instruction and lessons actually furnished under the agreement, plus a reasonable and fair service fee. On Pointe Dance Studio, Inc. will refund the balance within 10 days after receipt of the notice of cancellation made within the 3 day notice.

Reasonable and fair service fee means no more than 10 percent of the total contract price for contracts of \$1,000.00 and under.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_