Diva Dance Registration Form

August 15th 2022– May 2023 \$25 Registration fee holds your spot. Class sizes are limited! Send to 383 N. 400 W. Blackfoot, Idaho 83221 or turn in at the studio 26 N. 470 W.

Name	Age_	Grade	<u> </u>
Address		_Birthday	
Mom's Name	phone number	<u></u>	
Dad's Name	phone number		
Email			
Make Checks Payable t	o Diva Dance or Ver	nmo @Wend	y-Schild
Yearly Registration Fee - \$25		-	
(Tuition prices on the back of the receive a free item. If we do T S	nis paper) If you register b	y June 15 th , you	will
1 month of tuition – due the 1 st	wool of overy month regula	r price. Tuitio	n¢
If you pay tuition before the mo	•	-	\$ \$
If you pay after the 15 th of the m	_	-	\$
Paying Monthly tuition Total an			Ψ \$
t dying Mondily tartion Total an	Todale for what Monen.		Ψ
1 person in family - Paying A	ugust 16 th through May 2	26th INCLUDES	REG
	regular tuition price is \$40		
	regular tuition price is \$4		
	regular tuition price is \$5		\$
	regular tuition price is \$60		
-	ses are you adding?		+\$
,	ý 8 <u></u>	Yearly tuitio	:
Family Discount – <u>Family Disc</u>	ount is not included for the	•	
Monthly Price for 2 in a family i		_	
(August is $\frac{1}{2}$ price since it is $\frac{1}{2}$		\$	
How many are adding on a class	s x \$25 =	+ add on classes	s \$
		Total Amoun	
If paid before the month, subtra	ct \$2.50 for August & \$5 o	ther months	- \$
If paid after the 15th of the mont			\$
	Total an	nount paying	\$
Family Discount for paying er	ntire 9 ½ months include	es Reg. This is fo	or one
class per child. Price includes R	legistration Fee (2 in a fam	ily is \$690, 3 in	a family is
\$905, 4 in a family is \$1215)		Amount	\$
If you are adding another class _l	per child add \$25 X 9.5 = _	_	
for extra class		:	= \$
		m . 1 t	
		Total Amoun	t \$

time. Ask and instruc	tor for a make up day and time.	
Is there anything that	we should know about your child	?
Did anyone refer you	to our team?	
Please put a check by off if paid before the r	the classes you will be attending. nonth.	Remember that tuition is \$5
Aerial Silk		
Beginning	Tuesday 6:30-7:30	\$45 MONTHLY
Int./Adv.	Thursday 5:00-6:00	\$45 MONTHLY
Adult Team	Thursday 7:00-8:00 pm	\$40 MONTHLY
	studio, or you are a former studen	
Ballet		
Kind3rd	Wednesday 4:45-5:45	\$40 MONTHLY
4th-7th	Wednesday 6:15-7:15	\$40 MONTHLY
8th-12 th	Wednesday 6:15-7:15	\$40 MONTHLY
Cheerleading Cheer Show Team thr	Thursday 4:00-5:00 rough Audition only.	\$40 MONTHLY
Combination Dance	& Gymnastics (1st-up will be divi	ded into age groups of
Technique Dance & G	ymnastics) – Mommy & Me for age	
	Thursday 3:30-4:00	\$30 MONTHLY
	Tuesday 4:00-5:00	\$40 MONTHLY
1st-3rd Grade	Tuesday 5:00-6:30	\$45 MONTHLY
4 th -6 th Grade	Tuesday 5:00-6:30	\$45 MONTHLY
7 th -12 th Grade	Tuesday 5:00-6:30	\$45 MONTHLY
Gymnastics		
	back walkover) Thurs. 4:00-5:00	\$45 MONTHLY
	a back handspring) Thus. 5:00-6:00	\$45 MONTHLY
Advanced (can do a b	\$45 MONTHLY	
	– You must audition and be placed	
Diva Dance Compan	\$60 MONTHLY	
Diva Dance Compan	\$60 MONTHLY	
Diva Cheer Company	y	\$60 MONTHLY

Tuition and Registration is not refundable – However, you can make up missed class

WAIVERS AND RELLEASE FORMS

(Parent Release Form for Photography and Videography) I, the undersigned, give permission for					
Diva Dance to use video footage and/ or photographs of my					
child, This usage may include (but is					
not exclusive to) displaying publicly, distributing, or publishing photographs, and/or video of my					
child for the use in materials that include, but may not be limited to: -printed materials					
(brochures and newsletters - online and offline advertising and promotion -videos and digital					
nages such for use on Social Media By signing this form, I acknowledge that I am giving					
unrestricted permission for my child's image to be used in print, video, and digital media. I agree					
that Diva Dance Studio may use these images for a variety of purposes and that these images					
may be used without further notification. Parent/Guardian					
signatureDate					
Health Information and Medical Release/Waiver Form					
I,, the parent/guardian of					
, acknowledge and agree					
that in participating in any dance, aerial silks or gymnastics class, workshop, rehearsal,					
competition or performance, there is a possibility of physical injury or death. I voluntarily agree,					
therefore, to assume all risks and responsibility for any such injury or accident, which might					
occur to my child or me during any Diva Dance Studio classes, rehearsals, performances,					
competitions, or activities, I also exempt, release, and indemnify Diva Dance Studio, its owners,					
agents, volunteers, assistants, employees, faculty members, and/or students from any and all					
liability claims, demands, or causes of action whatsoever from any damage, loss, injury, or death					
to me, my children, or property which may arise out of or in connection with participation in any					
classes or activities conducted by Diva Dance Studio. I further hereby voluntarily agree to waive					
my rights and that of y heirs and assign to hold Diva Dance Studio, its owners, agents,					
volunteers, assistants, employees, faculty members and/or students liable for such damage,					
loss, injury, or death. I understand that I should be aware of my physical limitations and agree					
not to exceed them. If I am signing this waiver for my children, I certify that I am the parent or					
legal guardian and have the right to waive these rights.					
Date signed:					