



Office Address: 3266 Classic Drive ~ Snellville, GA 30078
www.discipleshipthroughdance.org

Monroe Location:

In the Youth House of Monroe First United Methodist

Commerce Location:

Old Maysville Baptist Church on Homer Street

Fall Registration Form – Please Print Clearly, One form per child

Circle one: **New Student** **Returning student**

Registration Date: _____

Student's Last Name: _____ First Name: _____ Middle Name: _____

Preferred Name if different: _____

Student's Birth date: _____ Age at enrollment: _____ Grade: _____ School: _____

Mother's Name: _____ Father's Name: _____

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Mom's work: _____ Mom's cell: _____

Dad's work: _____ Dad's cell: _____

E-Mail Address*: _____

*By giving us your e-mail address you give us permission to send you e-mails regarding school business. We will not share your e-mail address with any other third parties.

With whom does the child reside? _____

If this is a blended family, please give us names and relations, if you feel it will help us in relating to your child.

EMERGENCY INFORMATION

Contact: _____ Relation: _____ Phone #s: _____

Physical or medical problems, allergies or other situation of which we should be aware:

Class Selection (C/M, Ballet, Pointe, Jazz, Modern, P&W, Intensive, PIM, Theatrical Dance, Choreography or Mom & Me)

Class _____ Day _____ Teacher _____ Start Time _____ 1 hr 1.5hr 2 hr

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SCHOOL POLICY

Tuition remains the same each month regardless of holidays, extra classes or classes missed for inclement weather. You are guaranteed a minimum of 33 classes during the season (Aug-May). No refunds or deductions in tuition rates will be made for absences regardless of the reason. When corresponding classes are available, classes may be "made-good". The school reserves the right to put a "hold" on the delivery of recital costumes when an account is past due. The school also reserves the right to discontinue instruction of student(s) when account is 60 days past due.

WAIVER OF LIABILITY

I do hereby release En pointe, Inc., its Director, employees, coaches and any auxiliary staff from any liability in connection with the dance classes in which the above named student is enrolled. Given the nature of physical education classes, and with the knowledge that injuries might occur, I assume all risk associated with participating in dance activities. In addition, I realize that any other family member or guest may also be at risk for injury while in the dance studios or using studio equipment. Therefore, I understand that En Pointe is not held liable for any harm that may come to my personal property including, but not limited to, purses, dance bags, cell phones, I-Pods, mp3 players, and will assume all liability for any sustaining injury or personal loss.

Parent Signature _____ Date _____

Student Signature (If over 18) _____ Date _____

OFFICE USE ONLY: TOTAL HOURS: _____ MONTHLY TUITION: _____ REG FEE: _____