

Account Name {Billing} ..... Date .....

Address .....

City ..... State ..... Zip .....

Home Phone .....

Parent 1 ..... Email .....

Home Phone ..... Cell Phone .....

Parent 2 ..... Email .....

Home Phone ..... Cell Phone .....

Student Name .....  Male  Female

Please check one: .....  New Student  Continuing Student

Current Academic School ..... Grade {as of 9/2018} .....

Date of Birth ..... Age .....

Previous Experience/Study? .....

Physical Limitations {if any} ? .....

Class ..... Day ..... Time .....

Class ..... Day ..... Time .....

Class ..... Day ..... Time .....

Class ..... Day ..... Time .....

Class ..... Day ..... Time .....

Class ..... Day ..... Time .....

Class ..... Day ..... Time .....

My child will participate in the Spring Concert 2018  Yes  No

**Tuition is by semester, Fall and Spring. All fees must be paid and forms completed prior to one's first class. The following fees must accompany a completed, signed registration form:**

Spring Concert 2019 costume deposit (Pre-Ballet II & up) ..... \$60

**Other Fees:** Returned check fee ..... \$25

Late Charge ..... \$25

No refunds for voluntary withdrawal from classes. Credits from previously paid tuitions or credits from siblings or past students are not transferable. Fees, deposits and tuitions are non-refundable.

Name of Student's Physician ..... Phone .....

Persons to be contacted if you, your spouse, or Student's legal guardian(s) are unavailable:

Name ..... Phone .....

Name ..... Phone .....

Name ..... Phone .....

How did you hear about us?  Friend  RCD Production  Online  Advertisement  Other .....

**Tuition Policy**

I understand that I am responsible for the entire tuition of classes for which I have registered and that tuition payments will be applied to the term in which they are paid. There are no refunds for missed classes or voluntary withdrawal from RCD at any time during the term. Refunds will only be given in the event of prolonged illness or injury, verified by a doctor's excuse.

Signature ..... Date .....  
 {if under 18, signature of parent or legal guardian is required}

**Photography, Videography and Media Release**

I hereby grant to RCD permission to take photos, videos, and/or films of me, my son and/or daughter and consent to the use of such material for promotional purposes by RCD.

Signature ..... Date .....  
 {if under 18, signature of parent or legal guardian is required}

**Release**

I recognize the inherent risks of accident and injury associated with any program of exercise or dance and acknowledge that I am participating upon the express understanding that I am willing and able to accept full responsibility for my own safety and welfare. I hereby release RCD and agree to hold RCD harmless from and against all claims and liabilities whatsoever which I may have arising out of my participation at RCD, except for those resulting directly from gross negligence or willful misconduct of RCD. I hereby execute and deliver this Release to induce Ridgefield Conservatory of Dance to permit me to participate in its programs.

Signature ..... Date .....  
 {if under 18, signature of parent or legal guardian is required}

**Authorization for Substituted Consent and Emergency Contact Information**

I hereby grant permission to the Directors of Ridgefield Conservatory of Dance (RCD) or anyone designated by the Directors, and to those persons listed below as emergency contacts to authorize emergency medical or surgical treatment, including, but not limited to, blood or blood product transfusions, diagnostic procedures, and the administration of anesthesia, for Student where medically appropriate in case of injury, accident, or illness: subject, however, to the following limitations (if none, so state):

Limitations.....

This authorization is given for the benefit of Student. The authorization is given to the Directors with the understanding that the Directors, or the Directors' designee, (1) will act only in my absence, and (2) will act only until such time as I or my spouse or the Student's legal guardian or the persons designated by me can be contacted. I understand the medical appropriateness of such treatment shall be determined by the attending physician or by the medical facility's medical staff, and that such a determination shall be conclusive evidence of the reasonableness of the consent given. I agree to hold the Directors, anyone designated by the Directors, RCD and any employees, officers, and directors of RCD harmless from liability arising from any and all medical treatment, or complications arising therefrom, rendered as a result of consent given pursuant to this authorization.

I further authorize (1) the release by RCD or by the persons listed prior to the health care provider of such medical and personal information as RCD or the persons listed below may have regarding Student, and (2) the use of such information by the health care provider in the subsequent medical treatment of student.

Signature ..... Date .....  
 {if under 18, signature of parent or legal guardian is required}

**Students Do's:**

Students shall dress appropriately for class in their designated dress code with no jewelry except small stud earrings and religious emblems.

Students shall give respect to their instructors, peers, and self.

Students shall be on time and make every effort to attend all classes.

Students shall raise their hand to be dismissed for any reason barring an emergency.

Students shall wait at the back of the class upon re-entering until permission is given from the instructor to re-enter. This is for safety reasons as well as respect.

Students will wear appropriate street clothing outside RCD's walls.

**Students Don't's:**

Students shall not talk in class. The studio is a sacred space for learning.

Students will not enter the studio without an instructor.

Students shall not make requests of instructors to alter their classes in any way to personally accommodate them, or to challenge the authority of the instructors in any way.

Students shall not request to be moved to another level.

Students shall not leave faculty to clean up after their messes in any areas.

Students shall not bring anything into the studios except water bottles.

Students will not deface property of RCD.

For injury prevention reasons, students will not be permitted to participate in a class they are more than 10 minutes late for. Instead, the student will observe the class.

**Parents Do's:**

Parents will respect the decisions of the faculty in regards to level placement and casting decisions.

Parents will make every effort to ensure students are dropped off and picked up on time from RCD.

Parents will make payments in a timely manner.

Parents will understand that our attendance and dress code policy cannot include exceptions.

Parents will trust the professional opinions of the experienced faculty training their children.

**Parents Don't's:**

Parents will not interrupt classes or ask faculty to meet with them between classes. Rather, they will make an appointment to address concerns.

Parents will not ask faculty to re-cast students or to change the level of a child's placement that was made by professional instructors.

Parents will not ask faculty to work privately with their child to "catch them up" free of charge.

Parents will not ask faculty to make exceptions to the rules for their children.

I understand and will adhere to the above-mentioned policies.

Parent ..... Date .....

Child ..... Date .....