***DISCLAIMERS/ACKNOWLEDGEMENTS:***

**Your child will not be permitted to attend class unless all of the policies noted below have been signed by a parent/guardian and handed in with the registration form.**

Name of child/children attending class:

1. We post pictures on our website and Facebook. Student’s names are not posted with the pictures. Please sign below to let us know if Burchfield Dance does or does not have permission to use your child’s photo.

 I give permission for Burchfield Dance to use photos of my child.

Parent Signature Print Name/Date

I DO NOT give permission for Burchfield Dance to use photos of my child.

Parent Signature Print Name/Date

1. There is a $10 per costume late fee if your costume balance is not paid in full by the final payment date as noted on the Dance Program calendar. Please sign below, acknowledging that you have read and understand this fee and will pay this fee if applicable.

Parent Signature Print Name/Date

1. There is a $10 late fee for any tuition not paid after the 3rd week of each month. Please sign below, acknowledging that you have read and understand this policy.

Parent Signature Print Name/Date

1. All of our fundraisers, with the exception of one occurring during the year, are vehicles used to assist the families to be able to pay off a portion of their costume balance. Fundraising does NOT go towards the payment of tuition. All fundraising opportunities are voluntary and not mandatory. Please sign below, acknowledging that you have read and understand this policy.

Parent Signature Print Name/Date

Dance Junction

c/o Burchfield Primary School

1500 Burchfield Road Allison Park, PA 15101

Attn: Becky Benesh

Any questions, please feel free to contact Becky Benesh at 412-596-9370 or becky@dancejunctionpgh.com

***REGISTRATION FORM & PERSONAL HEALTH AND MEDICAL FORM***

**Student’s Name T-Shirt Size**

**Birth Date & Age**

**Address:**

**City: Zip:**

**Parent/Guardian:**

**E-Mail Address:**

**Home Phone: Cell Phone:**

**Grade & School:**

**If person named above is not available in the event of emergency, notify:**

**Name**  **Relationship Phone Number**

**Name**  **Relationship Phone Number**

**Name of Physician Phone number Personal Health Insurance Policy No.**

**Hospital Preference**

**Please List any Health Conditions**:

I hereby release, absolve, indemnify and hold harmless the Dance School Directors, Instructors, Staff and the Burchfield PTO Board of Directors and Dance School Volunteers from any and all responsibility for injury, loss of property and accidents resulting from participation in Dance School-Sanctioned Classes, Dance Parties Rehearsals, Performances, etc. I give permission to the Dance School Instructors and/or Managers to seek emergency medical attention for my child, if needed. If they are unable to contact me or the named emergency contact person, they have my permission to take my child to the Emergency Room at a local Hospital. I further agree to assume all financial responsibility for all medical and rehabilitative care which may be necessary for my child as a result of injury while participating in the Dance Program. As such, I acknowledge and guarantee the existence of sufficient medical insurance covering my child.

 **Signature of parent/guardian Date**

***CLASS OPTIONS***

**Please indicate the classes you are interested in by entering your child’s name into the column next to it.**

**TIME WEDNESDAY CLASSES CHILD’S NAME**

|  |  |  |
| --- | --- | --- |
| **5:00** | Beginner ballet/tap/jazz (60 min) with Ms. Jen - Lower gym  |  |
| **5:00** | Lil Hip Hop (30 min) with Ms. Kellie - Upper gym |  |
| **5:30** | Pre-Tumbling (30 min) with Ms. Kellie - Upper gym |  |
| **5:30** | Intermediate Tap (30 min) with Ms. Becky - Upper gym |  |
| **6:00** | Lyrical (30 min) with Ms. Jen - Lower gym |  |
| **6:00** | Intermediate Bollywood (30 min) with Ms. Mylie- Lower gym |  |
| **6:00** | Beginner Tumbling (30 min) with Ms. Kellie - Upper gym |  |
| **6:00** | Beginner Bollywood (30 min) with Ms. Becky- Upper gym |  |
| **6:30** | Mommy &Me (30 min) with Ms. Jen - Lower gym |  |
| **6:30** | Cheer (30 min) with Ms. Mya- Lower gym |  |
| **6:30** | Boy Tumbling (30 min) with Ms. Kellie - Upper gym |  |
| **6:30** | Pre Ballet/Tap/Tumbling (60 min) with Ms. Becky-Upper gym  |  |
| **7:00** | Intermediate Hip Hop (30 min) with Ms. Kia - Lower gym |  |
| **7:00** | Advanced Tap (30 min) with Ms. Mylie- Lower gym |  |
| **7:00** | Beginner Tumbling (30 min) with Ms. Mya - Upper gym |  |
| **7:30** | Beginner Hip Hop (30 min) with Ms. Kia - Lower gym |  |
| **7:30** | Intermediate Ballet (30 min) with Ms. Mylie- Lower gym |  |
| **7:30** | Intermediate Tumbling (45 min) with Ms. Mya – Upper gym  |  |
| **7:30** | Advanced Ballet (45 min) with Ms. Becky - Upper gym |  |
| **8:15** | Advanced Hip Hop (45 min) with Ms. Kia - Upper gym |  |

**TIME THURSDAY CLASSES CHILD’S NAME**

|  |  |  |
| --- | --- | --- |
| **5:00** | Pre Ballet/Tap/Tumbling (60 min) with Ms. Molly - Upper gym |  |
| **5:30** | Beginner Hip Hop (30 min) with Ms. Mylie - Upper gym |  |
| **6:00** | Beginner Ballet/Tap/Jazz (60 min) with Ms. Molly - Upper gym |  |
| **6:00** | Mommy & Me (30 min) with Ms. Becky - Upper gym |  |
| **6:30** | Contemporary (45 min) with Ms. Mylie - Upper gym |  |
| **7:00** | Beginner Baton (30 min) with Ms. Emily - Upper gym |  |
| **7:30** | Intermediate Baton (30 min) with Ms. Emily -Upper gym  |  |
| **7:30** | Advanced Bollywood (30 min) with Ms. Becky -Upper gym  |  |
| **8:00** | Advanced Baton (45 min) with Ms. Emily - Upper gym  |  |

**Referred By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Please leave blank if this is not your first year with the program or if you were not referred to the program by another student.)**