

Date _____ New Student _____ Returning Student _____ Sibling of Returning Student _____

Student's Full Name _____ Age _____ Date of Birth _____

Male / Female

Mailing/Billing Address:

City/State/Zip:

Daytime Phone Number: _____ Email Address

Mother/Guardian _____ Place of Employment

Position _____

Mother/Guardian Home Phone Number: _____ Mother/Guardian Cell Phone Number:

Father _____ Place of Employment

Position _____

Father Work Number: _____ Father Cell Phone Number:

School Presently Attending _____ Church Presently

Attending _____

Dance Education

EMERGENCY INFORMATION – Name and number of friend or family member not listed above we can contact if needed:

Name: _____ Telephone

Name: _____ Telephone

CONFIDENTIAL. PLEASE ANSWER THE FOLLOWING (IF STUDENT UNDER AGE 18)

Student lives with Both Parents Mother Father Other _____

Is there anything special we need to know about the student?

Medical and Medication _____ Learning/Behavioral/

Handicaps _____

How did you hear about our school? _____

I understand and agree to the following (please initial each):

_____ 1. This Registration Agreement is between myself and Seneca School of Performing Arts, and I understand I am paying for the class(es) I have registered for, and by signing below, I do hereby agree that I am obligated to pay the tuition for the entire school year (September-May), either by quarterly or yearly payments, regardless of my attendance.

_____ 2. Tuition is based on the September-May school year, but may be paid quarterly.

_____ 3. Quarterly tuition payments are due on September 1st, November 1st, January 1st, and March 1st, and are considered delinquent if not paid by the 10th of each month. A \$15.00 late fee will be charged when a payment is delinquent.

_____ 4. Any student whose account is not paid by the 10th of the month will be suspended from classes until their account is paid in full.

_____ 5. Tuition payments and all remaining fees (costume fees, late fees, etc.) must be current in order for student to participate in any performance, year-end program, or to have the recital costume ordered.

_____ 6. I agree to pay Recital/Costume Fees for the year-end program by October 12, 2017.

_____ 7. I agree to notify the school office, in writing, by October 26, 2017, if my student or I is/am NOT participating in the year-end program.

_____ 8. I understand that Seneca School of Performing Arts reserves the right to cancel any class that does not have a sufficient number of students enrolled to support the class and/ or in cases of dangerous weather conditions.

_____ 9. I agree to read the Seneca School of Performing Arts handbook and agree that my student and/or I will adhere to all the rules and requirements stated therein, including hair and dress code.

_____ 10. By signing below, I do hereby release Seneca School of Performing Arts and their agents or representatives of liability for my child (or myself) of any injury to my child (or myself) in class, while on the school property, or while participating in Seneca School of Performing Arts sponsored performances. I understand that in the event medical intervention is needed, every attempt will be made to contact the person(s) listed on the student's registration form. In the event next of kin cannot be contacted, for the health and well being of my child (or myself), I hereby authorize the Administrator, Staff Person or Instructor of Seneca School of Performing Arts to authorize whatever medical treatment that might be necessary in an emergency situation. I understand that I and my medical insurance carrier are financially responsible for any medical treatment extended to my child (or myself), and that Seneca School of Performing Arts and its agents or representatives cannot be held accountable or liable for such medical treatment.

DateStudent (if 18 or over)

DateParent (If responsible for student's tuition)

Verification of class(es)

I have enrolled (student's name) _____

In the following class(es) _____

Day(s) of week _____ Time(s) _____

Amount Enclosed: \$ _____
Yearly _____ Quarterly _____

Seneca School of Performing Arts
REGISTRATION FORM