

2016-2017 Dance Registration Form

Bella Dance Academy

Director: Jamie Boeri (970) 367-3213

Studio Location: Sundance Studio

2nd Semester Kids Dance Class Schedule starts January 9th

Monday

Ballet 1 (Ages 5-6 yrs) 4-5 pm

Tuesday

Ballet 2 (Ages 6-9 yrs) 4-5 pm

Wednesday

Pre-Ballet (Ages 3-4 yrs) 1:45-2:45 pm

Jazz 2 (Ages 9-12 or instructor's approval) 4-5 pm

Thursday

Jazz/Hip Hop 1 (Ages 6-8 yrs) 4-5 pm

Tuition Fee Schedule:

- Registration form, tuition fee and registration fee must be received by January 1st to reserve your spot.
- Registration form can be dropped off at Sundance Studio or emailed to jamieboeri@gmail.com
- Registration Fee is \$25 per family due with enrollment.
- Tuition Fee is \$240 per semester per child
- Payment of Tuition fee can be made with cash or check or online with credit card at www.sundance-studio.com
- Refund of Tuition Fee will only be given on a case by case basis. Registration Fee is non-refundable.
- For additional information, please call or email Jamie Boeri (970) 367-3213 or jamieboeri@gmail.com.

2nd Semester: January 9, 2017 through May Recital 2017

- \$240/semester/child + \$25 registration fee/family
- Recital Fee/Costume Fee: TBD

Student Information:

Child 1

NAME AGE BIRTH DATE GRADE/SCHOOL

Class days and times:

Child 2

NAME AGE BIRTH DATE GRADE/SCHOOL

Class days and times:

Child 3

NAME AGE BIRTH DATE GRADE/SCHOOL

Class days and times:

Family Information:

Mother's Name _____ Cell _____

Father's Name _____ Cell _____

Mailing Address _____

Email Address _____ Home Phone _____

Family Doctor _____ Medical Problems _____

Release:

I, the undersigned parent or legal guardian, do voluntarily enroll my child/children in dance class. I realize there is always the possibility for personal injury when engaging in this type of physical activity. I hereby assume full responsibility for all damages or injuries that my child/children might incur or cause. I hereby waive Jamie Boeri of Bella Dance Academy, Sundance Studio, and any assistant teacher for any injury that my child/children may sustain.

Parent Signature: _____ Date: _____