

**Fall Contract 2020-2021**

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade \_\_\_\_\_

Parents Name: \_\_\_\_\_ Address: \_\_\_\_\_

**Email/Cell Phone Verification:**

Please provide a valid email address below that you check regularly. All communication for the studio is done via email and/or text. Information such as class cancellation, time changes, etc. is done by email and/or text. This will be your only means of communication.

Parents email: \_\_\_\_\_ Parents Cell: \_\_\_\_\_

Childs email: \_\_\_\_\_ Childs Cell: \_\_\_\_\_

**Financial Obligation:**

By signing below, I am financially responsible for payment of this account and agree to make all payments on a timely basis. The registration, insurance, performance fees as well as costume deposits as stated in the studio brochure and website are non-refundable with terms. I also agree to the \$25 service charge of any of my checks should be returned by the bank. In addition, I understand that my account will be charged a \$15 late for any tuition payments received after the 15<sup>th</sup> of any given month. If fees are not paid by the end of each month, I understand that my child will not be able to participate in classes and performances.

**Please initial:**

\_\_\_\_\_ I am responsible for payment of this account and agree to make Tuition on time. I am aware that the payment is due by the 10<sup>th</sup> of each month for tuition. I am also aware that if payment is not made by the end of each month a \$15 late fee will be added to my balance that is due.

\_\_\_\_\_ If payment becomes delinquent and is not paid within 30 days our child will be asked to sit out of class until balance is paid and account is current.

\_\_\_\_\_ Registration and tuition fees are non-refundable.

\_\_\_\_\_ Costume fees are refundable providing we are notified in writing that your child has quit his/her class and it is done before November 30<sup>th</sup>. As of December 1<sup>st</sup> there will be no refunds no matter what the circumstances are.

\_\_\_\_\_ There is a \$25 service fee if your check is returned for insufficient funds.

**Waiver and Release from Liability:**

In consideration of being allowed to participate in any lessons, rehearsals, recitals or any other events sponsored by Infinity Dance Academy and its successors and assigns, 183 East Main Street, Fredonia, New York 14063 and any related events or activities and intending to be legally bound, the undersigned:

Infinity Dance Academy, its instructors, and MEC Properties, Inc. will not accept responsibility for injuries sustained by any student during instruction of any program offered by Infinity Dance Academy. I recognize that potentially injures can occur in sports or activities involving motion or height. With the above in mind and being fully aware of risks and possibility of injury involved, I consent my child/children and myself to participate in the programs offered by Infinity Dance Academy. In consideration for allowing my child/children and myself to use these facilities, and while under all instruction, supervision, or control of Infinity Dance Academy. I, my executers, other representatives, waive and release all rights and claims for damages that my child/children or I may have against Infinity Dance Academy and its representative whether paid or volunteer.

I hereby agree to individually provide for all present and possible future expenses, which may be incurred, by my child or myself as a result of any injury sustained while participating at Infinity Dance Academy.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending classes at Infinity and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at Infinity may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Infinity staff, instructors, students and their families.

**Authorization for use of photos in advertising purposes only:**

Enrolling your child in Infinity Dance Academy, you are also giving permission to use your child's photo, strictly and only for promotional purposes.

By signing this, I acknowledge all the above information and completely understand and give permission for all the above.

Signature: \_\_\_\_\_

Relationship to participant: \_\_\_\_\_

Date: \_\_\_\_\_

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**Credit Card Info:** (Please fill out if you would like your monthly fees automatically deducted)

Name on card: \_\_\_\_\_

Type of Card:    Visa    Mastercard

Card #: \_\_\_\_\_

Exp date: \_\_\_\_\_

CV code: \_\_\_\_\_

Signature: \_\_\_\_\_

Zip Code \_\_\_\_\_