



Registration 20__ - 20__

346 Main Ave. 3rd floor
Norwalk, CT 06850
203.663.1414
www.studioartect.com

Please fill out and return to Studio Arte along with registration fee.

Returning Student: _____ New Student: _____

Student Name: _____

Birthdate: _____ Age: _____ Grade: _____

Mother's name: _____ Mom's Cell Phone: () _____

Father's name: _____ Dad's Cell Phone: () _____

Address: _____ City & State: _____

Zip Code: _____

Emergency Contact Name: _____

Relation to Student: _____ Phone Number: () _____

Medical Conditions/Allergies: _____

CLASSES ENROLLED IN

| CLASS NAME | DAY | TIME | TUITION |
|------------|-------|-------|----------|
| 1. _____ | _____ | _____ | \$ _____ |
| 2. _____ | _____ | _____ | \$ _____ |
| 3. _____ | _____ | _____ | \$ _____ |
| 4. _____ | _____ | _____ | \$ _____ |
| 5. _____ | _____ | _____ | \$ _____ |
| 6. _____ | _____ | _____ | \$ _____ |

Total Tuition: \$ _____

\$35 Registration fee: _____

\$45 Family Registration fee: _____

Paid Today: \$ _____ Balance Due: \$ _____

_____ Plan A: Automatic credit payment on the **1st of each month.**

_____ Plan B: Payment of tuition in full at registration.

_____ Plan C. Monthly. **(You are not paying for scheduled school vacation & holidays.)**

Late payment: A \$10 late fee will be applied to accounts not paid by the 10th of each month.

Payment can be made by cash, check or credit card.

Checks made payable to Studio Arte.

Visa / MasterCard / American Express Card:

CC Number: _____

CV2: _____ Exp. Date: _____ Zip Code: _____

Cardholder's Name

Authorizing Signature

Date

I hereby authorize Studio Arte to initiate automatic payments to my account from the Credit card information above.

Studio Information & Policies

- Tuition is based on the number of classes taken in a week.
- Our program begins on _____ and ends on _____. There are **35** classes in the year.
- After a month of registration, **Tuition is not refundable.**
- After a month of registration, class enrollment can no longer be changed.

Payments:

- Tuition payments are due on the **first day of the month**. You have until the **10th of each month** to pay tuition. If a payment is not received by the due date, a **\$10 late fee** will be applied to your account.
- Tuition remains the same regardless of absences and whether it is a long (**5 weeks**) month or a short (**3 week months**). Tuition is per month, not per class!
- Payments can be in the form of cash, credit card or check made payable to "Studio Arte". Online payment is the fastest and easiest way to pay!

Registration Fee:

There is a Non-Refundable **\$35 registration fee** per student or **\$45 per family**.

- **Withdrawal policy:** All withdrawals must be submitted in **writing 15 days** prior to your upcoming tuition payment, and be confirmed by Studio Arte by email. If you do not receive this confirmation, it is your responsibility to follow up with the studio and confirm receipt of withdrawal letter.
- You will be responsible for the next payment if you do not give a **fifteen-day written notice**.
- Please be aware that no prorating or refunds will be issued due to withdrawing from classes.

Make-up classes: If a class or classes are missed, students are allowed up to **3 Make-up classes** in the year. Parents must fill out a make-up request form to be eligible for a make-up class. The student can make-up missed class in a class of the same level or any other genre. No make-up classes will be allowed during the last 2 months of rehearsals for the end of the year show. There will be no prorating or refunds given due to missed classes. Initial payment will be collected at the time of registration.

Costume payments:

- Costume payments are a separate charge from tuition payments, and will be paid in **3 installments: October & November 2019 & February 2020**. Please keep in mind that the October and November payments are deposits and will go toward your final costume balance.
- All registrations after February 15th are ineligible for recital participation.

Studio Rules:

- Students should be dressed and prepared for class before it starts. Dance wear is required for all classes. Please see uniform codes.
- Hair should always be securely pulled away from the face for all classes. For ballet: hair needs to be pulled back in a ballet bun.
- **No street shoes** should be worn in the studios. Please change into dance shoes before class.
- No food or drinks of any kind are allowed in the studios.
- Parents should not leave young students unattended in the waiting area before or after class.
- Chewing gum is never allowed in the studios.
- Always treat your teacher and classmates with respect.
- Students and parents are responsible for their belongings. Do not bring valuables into the studio or waiting area. Studio Arte is not responsible for lost, stolen, or misplaced property.

Attendance: Good attendance is imperative, as absences and tardiness can hold back an entire class. Students should be prompt and prepared for class.

Bad Weather/Cancellations:

- If classes are canceled due to bad weather we will have a make-up day. We do not cancel just because the public schools or other establishments are closed due to the weather. Check our website's homepage at www.studioartect.com where you will find info about cancellations. You may also refer to our social media accounts Instagram and Facebook. This information will be available after 2:00 pm Mon-Thurs and as early as 8am for Saturday classes. You may also receive a text message on your phone with the latest information.

Photo/Video Release Waiver

I acknowledge and consent to allow Studio Arte to use photos and/or videos of my child/myself in publications (such as flyers, /brochures), advertisements (such as newspapers or online ads), our studio's website, or on social, media sites (such as the studio's facebook or instagram account). I understand that in some cases, my child and/or my name may be used I further understand no financial compensation will be use of these photos/videos.

Please Circle: Yes No

Signature (parent/guardian for minors)

Printed Name

Release of Liability-Medical

I hereby agree to release **STUDIO ARTE** and its staff from liability occurring on or around the studio premises, or any function held at other locations in connection with dance classes in which student (s) named above is/are enrolled. I declare that the student(s) named above is/are in good health and can participate in dance education classes. Given the nature of dance classes, and with the knowledge that injuries sometimes occur, I have taken the necessary steps to obtain accident, health, or hospitalization insurance which cover any sustained injury. In the event of an injury or emergency when I cannot be contacted, I give permission to Studio Arte and its staff to obtain medical services for the student(s) named above. I (We) acknowledge and agree to all the above listed admission policies described above.

Child Name: _____

Print Name of Parent _____ Date _____

Signature of Parent _____ Date _____