

PERMISSION SLIP - TAKE FIVE DANCE ACADEMY

JUNE DANCE PRODUCTION 2026



PARENT'S NAME & SIGNATURE (SIGNATURE AND INITIALS ARE REQUIRED)

PARENT'S NAME: _____

PARENT'S SIGNATURE: _____

INT. _____ **1. BY SIGNING, I ACKNOWLEDGE** that I have read and agree to follow the items described below on this permission slip. Also, I hereby give my permission for my child to perform in Take Five Dance Academy's Annual June Dance Production.

INT. _____ **2. TUITION WILL NOT BE ALTERED & ACCOUNT BALANCES MUST BE PAID:**
I understand that February, March, May and June tuition will not be altered due to Take Five teachers' involvement with class pictures, parent meetings, dress rehearsals and performances. I understand full June tuition, costumes, tickets, and any other balance on my account must be paid before my child/children may participate in the dress rehearsal and performances. Make-up classes are available until the end of May. Please plan accordingly.

INT. _____ **3. PURCHASES/PAYMENTS/NO REFUNDS:** I acknowledge all the financial obligations in participating in the June Recital. I understand that all sales of costumes and tickets are final. There are no refunds. I also acknowledge Take Five Dance's policy that they are unable to provide refunds or credits for any performances that are cancelled, moved to a virtual platform, or are unable to proceed as the result of local, state and federal government orders regarding natural disasters or public health. Take Five Dance Academy is not responsible for any items (like costumes or DVDs) that are not picked up after 60 days of the final performance of this production.

INT. _____ **4. RECITAL PACKET & POLICIES:** I have received the Recital Packet or have downloaded it from TakeFiveDance.com. I have read the packet thoroughly, in its entirety, and fully understand that I must abide by the Studio, Recital, and Ticket Purchasing Policies.

INT. _____ **5. COSTUMES:** I will pay for all costuming required for the performance with the understanding that it will become my property upon completion of payment. I have received the list of class performances and understand that my dancer(s) will not be able to change classes once costumes are ordered. **I understand that any costume orders placed AFTER the deadline of October 25, 2025 may not be delivered in time for group/individual pictures.**

INT. _____ **6. ATTENDANCE:** Dancers must attend at least 50% of their registered class(es) during the months of April, May and June, in order to perform in the June Recital. Attending classes on a regular basis is important in any learning experience. The consistency and repetition of training is necessary for the dancer to learn proper technique and the routine for the June Recital.

INT. _____ **7. MANDATORY PARENT MEETINGS:** I am aware that an adult representing my child/children must attend the Mandatory Parent Meeting(s) in order to ensure organized dress rehearsals and successful performances.

INT. _____ **8. ACCIDENT OR INJURY:** Any and all parents/guardians who register their child(ren) at Take Five Dance Academy waive and release Take Five Dance Academy and their directors, employees, staff, volunteers, representatives, or assigns, as well as any activity sponsors, from any and all liability, including any claim for damaging or suit by reason of injury, illness, virus or damage to person or property during the course of dance classes, rehearsals, in-studio activities, and any events off property.

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THIS IS HOW IT WILL BE PRINTED IN THE PROGRAM BOOK.

CHILD'S NAME (FIRST/LAST):

PARENTS NEED TO MEASURE THEIR CHILD
& FILL IN THE FOLLOWING INFORMATION

IMPORTANT:

Orders placed **AFTER OCT. 25, 2025**
MAY NOT BE DELIVERED IN TIME
for Group and Individual pictures.

GIRLS ONLY

BUST:

WAIST:

HIPS:

GIRTH:

Round UP to the nearest whole number. i.e. 34 1/2" = 35"

BOYS ONLY - BOTH Letter & Number sizes are needed.

PANT: LETTER SIZE _____ NUMBER SIZE _____

SHIRT: LETTER SIZE _____ NUMBER SIZE _____

CHILD'S CLASS INFO, YOUR SELECT SIZE, MEASUREMENT CHART COLOR AND COSTUME COST

CLASS	DAY	TIME	TEACHER	COST	CHART COLOR	SIZE	OFFICE USE ONLY:			
1.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
2.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
3.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
4.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
5.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
6.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
7.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
8.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
9.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
10.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
11.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
12.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
13.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
14.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____
15.				\$			PD	RECTAL	MKPD	SIZE _____ EXTR _____ SPEC _____ CK _____



COSTUME(S) TOTAL \$ _____

<<< SEE OTHER SIDE

PAYMENT AMOUNT \$ _____

SIGNATURE & INITIALS REQUIRED

BALANCE DUE \$ _____

OFFICE USE ONLY:

DATE ____/____/____ REC'D BY _____ CHECK NAME _____
MEA. IN DW _____ "IN RECITAL" IN ROLL BOOK (JAN) _____
EXTRA - WRITE IN BOOK _____ SPECIAL - MAKE FORM _____
NOTES _____