

FIREWORKS DANCE CENTER- ACCOUNT PRE-REGISTRATION FORM

(Please print) Families are to fill out **one form**. **MAKE SURE ALL INFORMATION IS FILLED IN.**
Incomplete forms will be returned and not processed.



Step One

ACCOUNT HOLDER INFORMATION

First Name: _____ Last Name: _____
 Address: _____ City: _____ Zip: _____
 Home Phone: _____ Emerg. Contact Name: _____ # _____
 Email Address _____

Step Two

STUDENT INFORMATION

1. Name _____ DOB ____/____/____ Age _____ Years at Studio _____
 2. Name _____ DOB ____/____/____ Age _____ Years at Studio _____
 3. Name _____ DOB ____/____/____ Age _____ Years at Studio _____
 4. Name _____ DOB ____/____/____ Age _____ Years at Studio _____

Step Three

HOW DID YOU FIRST HEAR ABOUT US? *Check one.*

<input type="checkbox"/> Door hanger	<input type="checkbox"/> Google/Internet Search	<input type="checkbox"/> Received Ad through Mail
<input type="checkbox"/> Drove By/ Walked By	<input type="checkbox"/> Lawn Sign	<input type="checkbox"/> Website
<input type="checkbox"/> Event <i>(name event)</i>	<input type="checkbox"/> Playbill Ad <i>(which theater/ show?)</i>	<input type="checkbox"/> Yelp
<input type="checkbox"/> Facebook	<input type="checkbox"/> Postcard	<input type="checkbox"/> Other
<input type="checkbox"/> Friend	<input type="checkbox"/> Newspaper Ad <i>(which paper?)</i>	

Step Four

SELECT PAYMENT PLAN *Check one.*

___ **Annually** – One payment at time of registration. (10% discount with this plan) Non-refundable after 12/1/18. Dropped classes before 12/1 forfeit discount and will be charged at full price.
 ___ **Semi-Annually** – First payment due at time of registration. Second payment due Feb. 1 (5% discount with this plan) Non-refundable after 12/1/18. Dropped classes before 12/1 forfeit discount and will be charged at full price.
 ___ **Monthly** – First month is due at time of registration. First month is partially (75%) refundable for one month from date of registration. Non-refundable thereafter. Monthly tuition due by the 7th of each month October through May.
 ___ **Automatic Monthly CC Processing** Card # _____ Exp Date _____ CCV _____

Step Five

FINE PRINT

I grant permission to the staff of Fireworks Dance Center to take first aid or emergency measures as judged necessary for the care and protection of my child while under the supervision of the studio. In case of medical emergency, I understand that my child will be transported to an appropriate medical facility by the local emergency unit for treatment if the emergency unit deems it necessary. I understand that in some medical situations the staff will need to contact the emergency resource before the child's parent, physician, and or other person acting on the parent's behalf. I also understand and agree that the child's parents or legal guardians shall be responsible for any expenses incurred. I agree to hold harmless from any and all liability Fireworks Dance Center, its officers, employees and contractors both in their professional capacity and personally for all injury or illness resulting from or in any way connected with his/her participation in the classes, activities or special events at the studio, rehearsals, performances, or studio related events. Parents/legal guardians give their permission to the studio to use photos and/or video of their child without remuneration in connection with studio publications, advertising, TV, and news coverage. I hereby agree to abide by the price structure indicated above. I understand the late fee policy and agree that any past due accounts will be responsible for late fees as well as all legal or collection agency fees deemed necessary to collect on delinquent accounts. I understand no further discount or refund will be made for missed classes. I agree to follow all policies and procedures as stated in the Welcome Packet and in all future studio newsletters.

SIGN HERE → Account Holder Signature _____ Date _____

Office Use Only		Payment Method	Amount	Date
CA	CK# _____	M/C DISC VISA	Other \$ _____	____/____/18



STUDENT PRE-REGISTRATION FORM

Fill out one form per student. Hand in with family registration form and deposit.
If you are unable to do the schedule we give you, your deposit will be refunded.

Student Name: _____

1

Choose classes for the 2018-2019 Season below and write the Quantity for each class on the line.

Programs that offer Recital:

- | | | |
|--|--|--|
| <input type="checkbox"/> Tiny Stars (3-Year Olds) | <input type="checkbox"/> Acro (ages 5+) | <input type="checkbox"/> Hip Hop (first grade+) |
| <input type="checkbox"/> Mini Movers (4-5 Year Olds) | <input type="checkbox"/> Ballet (first grade+) | <input type="checkbox"/> Jazz (first grade+) |
| <input type="checkbox"/> Kindergarten Combo (5-6 Year Olds) | <input type="checkbox"/> Cheer Dance (first grade+) | <input type="checkbox"/> Musical Theatre (first grade+) |
| <input type="checkbox"/> Mini Hip Hop (4-7 Year Olds) | <input type="checkbox"/> Boys Hip Hop (first grade+) | <input type="checkbox"/> Tap (first grade+) |
| <input type="checkbox"/> Tumbling (4-7 Year Olds) | <input type="checkbox"/> Broadway Tap (prereq:1 year tap) | |

Enrichment Programs:

- | | |
|--|--|
| <input type="checkbox"/> Pre-Pointe (Faculty Approval, two ballet classes per week required) | <input type="checkbox"/> Competition Dance Team – Green Level (ages 5+; Recreational Level) |
| <input type="checkbox"/> Dance Enrichment (Ages 7 & up) Cross training for the serious dancer and regular work on acrobatic skills. | <input type="checkbox"/> Competition Dance Team – Green Level (ages 7+; pre-req: 1 year Competition Dance Team) |
| <input type="checkbox"/> Jumps & Turns / Technique (3 Yrs ballet & jazz exp. required, ages 10 & up) | |

For more information on above classes, visit www.fireworksdance.com for class descriptions.

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Fill out the below questions to help us plan the perfect schedule.

What time do you get out of school? _____
What time can you get here for classes? _____

REQUESTS

DAY	REQUESTED TIMES & OTHER REQUESTS
MONDAY	
TUESDAY	
WEDNESDAY	
THURSDAY	
FRIDAY	
SATURDAY	
SUNDAY	

CONFLICTS

What days/times would **NOT** work due to your religion class and/or other activities?

DAY	TIME & ACTIVITY
MONDAY	
TUESDAY	
WEDNESDAY	
THURSDAY	
FRIDAY	
SATURDAY	
SUNDAY	

Priority Pre-Registration T-Shirt Size: (Circle one)

- | | | | |
|---------------------------------------|---------------------------------------|--|---|
| <input type="checkbox"/> Small Child | <input type="checkbox"/> Medium Child | <input type="checkbox"/> Large Child | <input type="checkbox"/> Small Adult |
| <input type="checkbox"/> Medium Adult | <input type="checkbox"/> Large Adult | <input type="checkbox"/> X-Large Adult | <input type="checkbox"/> 2X-Large Adult |

Are there any disabilities, special needs, relevant medical information of which our staff should be aware?

Is there anything else we should know before registering you for a class?

What is your goal as a dancer/performer?

- | | |
|---|--|
| <input type="checkbox"/> Serious Dancer | <input type="checkbox"/> Like to Perform |
| <input type="checkbox"/> For Exercise | <input type="checkbox"/> Social |
| <input type="checkbox"/> Other _____ | |

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Please understand!

Fireworks Dance Center facilitates over 50 classes and programs per week for hundreds of students and families. **Due to varying school ending times, we schedule a majority of our weeknight classes between the hours of 4 and 9:30 PM.** We typically schedule classes for younger dancers (Tiny Stars, Mini Movers, & K Combo) towards the beginning of our weeknight schedules, while older and advanced classes typically are scheduled toward the end of the weeknight. **Although Fireworks Dance Center tries to accommodate as many requests as possible, we cannot guarantee everyone's requests will be met. If the class schedule you are given does not work for you, we will refund your deposit.**