

**BEVERLY'S SCHOOL OF
DANCE**

TUITION (Office Personnel)

		Class day and class time for Office Personnel to Complete	
STUDENT'S LAST NAME		CLASS DAY	CLASS TIME
FIRST NAME		DATE OF BIRTH	AGE
SECOND STUDENT		DATE OF BIRTH	AGE
E-MAIL ADDRESS (Please Print)			
CELL PHONE NUMBER			
MOTHER'S NAME	FATHER'S NAME		
HOME ADDRESS			
CITY	ZIP	HOME PHONE	
MOTHER'S EMPL	PHONE		
FATHER'S EMPL	PHONE		
RELATIVE / FRIEND	PHONE		
EMERGENCY CONTACT	PHONE		
ANY PHYSICAL ILLNESS			

MY CHILD WILL RIDE TO AND FROM DANCE WITH:

In consideration of the benefits derived from BEVERLY'S SCHOOL OF DANCE, I, (We) do hereby agree to indemnify and hold harmless, release and discharge the sponsoring organization of said BEVERLY'S SCHOOL OF DANCE, it's agents, servants and/ or employees, from any and all claims for personal injuries or property damage or loss occurring to or sustained by my (our) son or daughter while participation in said dance activity or while in the act of being transported to and from said activity or activities related to dance and including any and all consequential damage claims which I (We) may be entitled to recover from said injury or property damage or loss claim.

I will be responsible for 9 payments of tuition until I have notified BEVERLY SMITH otherwise. I understand that tuition is All-Inclusive and will cover Tuition, Costumes, All Performances and Recital Fees. This amount is due according to the payment plan you selected and you will be responsible for any NSF fees. I understand that tuition is due regardless of absences or the student's failure to attend class. In addition tuition is due during the months in which Thanksgiving, Christmas, Spring Holidays and Recital are observed

There will be no refunds on services rendered, registration fees or costumes. I understand I am obligated to pay for the remaining balance of the costume fee if my child drops.

ADVERTISING: Photos, videos, film or audio recordings taken during the events become the property of BEVERLY'S SCHOOL OF DANCE, who reserves the right to use those items for marketing and publicity purposes.

I have read, understand and agree to the above as indicated by my signature:

_____ Date: _____
Signature of Parent or Guardian

\$30.00 fee payable by PayPal Beverlyschoolofdance@gmail.com or mail in check with the form