



Registration fees and the first month's tuition are due at time of enrollment. No refunds on tuition, registration fees, costume rentals or purchases, or recital fees.

Dance: _____ Music: _____ Children's Choir: _____ Toddler Time: _____ Kindermusik: _____

Student: _____

Age: _____ Birthday: _____ Grade: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____ email: _____

Home Phone: _____ Student's Cell Phone: _____

Father/Guardian: _____

Employer (if self-employed, what business): _____

Business Phone: _____ Father's Cell Phone: _____

Mother/Guardian: _____

Employer (if self-employed, what business): _____

Business Phone: _____ Mother's Cell Phone: _____

Emergency Care Information: If neither Mother or Father can be contacted, please tell us who to contact:

Name: _____

Home Phone: _____ Cell : _____ Work: _____

Special health concerns: _____

I, the undersigned, hereby consent to my child(ren) and/or myself receiving training and instruction at Crystal Coast School of the Arts. I understand and acknowledge that nearly all athletic undertakings may result in personal injury to the participant. However, in consideration for the instruction and training of my minor child(ren) and/or myself I, the undersigned parent/guardian save harmless Wendy Ann Stephenson and the staff and Crystal Coast School of the Arts from any and all claims, damages and expenses arising from personal injury that may be sustained by my minor child(ren) and/or myself while attending Crystal Coast School of the Arts and/or participating in performances.

I give Crystal Coast School of the Arts permission to use photographs of my child(ren) in advertising, print and the website.

I understand tuition is due on the 25th of each month in advance of lessons. Payments made after the 30/31st will be charged a \$10 late fee. Tuition is due in full whether or not my child(ren) or myself attend lessons. No refunds on tuition or registration fees. Tuition is based on a 10 month school year and is payable in 10 equal monthly payments regardless of the number of weeks in the month. Signed: _____ Date: _____

Print Name: _____