

**PERSONAL INFORMATION**

Student Name \_\_\_\_\_

Date of Birth: \_\_\_ / \_\_\_ / \_\_\_      Age: \_\_\_\_\_      Pronouns: \_\_\_\_\_

Address: \_\_\_\_\_      Apt.# \_\_\_\_\_

City: \_\_\_\_\_      State: \_\_\_\_\_      Zip Code: \_\_\_\_\_

Primary Phone: \_\_\_\_\_      Email: \_\_\_\_\_

Allergies/Medication: \_\_\_\_\_

**Emergency Contact**

or Parent/Guardian (1): \_\_\_\_\_      Relationship: \_\_\_\_\_

Email: \_\_\_\_\_      Phone: \_\_\_\_\_

Parent/Guardian (2): \_\_\_\_\_      Relationship: \_\_\_\_\_

Email: \_\_\_\_\_      Phone: \_\_\_\_\_

**LEGAL RELEASE & STUDIO POLICY ACCEPTANCE ( please initial )**

\_\_\_ I/we understand the Studio Policies      \_\_\_ I/we give photo & video use rights permission

\_\_\_ I/we understand the Dress Code      \_\_\_ I/we understand my billing obligations

\_\_\_ I/we understand the Attendance Policy      \_\_\_ I/we release RDA of liability in event of injury

\_\_\_ I/we would like to be an RDA volunteer      \_\_\_ I/we would like to donate \$ \_\_\_\_\_ to RDA

\_\_\_ I/WE UNDERSTAND THE COVID-19 SAFETY PROTOCOLS AND AGREE TO  
ADHERE TO THEM

**REFUND POLICY**

Students are encouraged to make up missed classes. Make-up classes can be arranged through the RDA office. Classes cancelled by RDA are subject to a tuition credit or refund. No tuition refunds will be processed due to an inclement weather closing.

**I/We agree to the above releases and policies**

\_\_\_\_\_  
Signature of dancer (18y+) or parent/guardian

\_\_\_\_\_  
Date

## WEEKLY CLASS REGISTRATION

List classes.

DAILY CLASS SELECTION	TEACHER & CLASS DAY	MY PREFERENCE IS:	
		ZOOM	IN PERSON
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

Weekly Class Tuition Rates				
1	2	3	4	5
\$375	\$740	\$1,090	\$1,420	\$1,725
6	7	8	9+	
\$2,000	\$2,240	\$2,400	\$2,595	

Class Card Tuition		
Single	5	10
\$25	\$120	\$230

Class cards are designed for adult dancers and may be a good idea if you are unable to commit to attending the full term.

\* No individual dancer will be made to pay for more than 6 classes during the fall & spring terms.

\* Families with multiple dancers will not be made to pay for more than 9 classes during the fall & spring terms.

**I/We agree to pay the above total or to arrange a payment arrangement.**

\_\_\_\_\_  
Signature of dancer (18y+) or parent/guardian

\_\_\_\_\_  
Date