



SPIRIT OF DANCE  
179 S. ALGOMA ST., 2ND FLOOR THUNDER BAY, ONTARIO P7B 3C1  
(807) 623-4789 www.spiritofdance.org  
spiritofdancetbay@yahoo.ca and spiritofdance.billing@gmail.com

**REGISTRATION FORM: ADULT**

ADULT NAME: _____ AGE: _____
BIRTHDAY: _____
PREVIOUS DANCE EXPERIENCE: _____ REFERRAL: _____

INFORMATION	ADDRESS	HOME PHONE NUMBER	CELL NUMBER

Email Address (mandatory): \_\_\_\_\_

Secondary Email Address (optional): \_\_\_\_\_

Medical Conditions/Allergies:  
\_\_\_\_\_

Custody Agreements the studio should be aware of:  
\_\_\_\_\_

We, the staff at Spirit of Dance studio, recognize our obligation to ensure our students and their parents/guardians are aware of the risks and hazards involved in dance education. By signing this waiver, you release Spirit of Dance and all its employees and volunteers from all claims on account of any injury which may be sustained by your child while attending any dance class, workshop, recital, competition, dance trip or fundraiser, associated with Spirit of Dance. In signing this waiver, you also acknowledge your responsibility in paying all tuition, associated costumes, performance or competition entry fees (if applicable) and all other communicated costs involved.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_ PHOTO RELEASE: By initialing here, I give permission for photographs of my child in dance class or performances to be used in promotional material for Spirit of Dance, in both print and web publications.

\_\_\_\_ By initialing here, I am giving permission to spiritofdancetbay@yahoo.ca to email any applicable newsletters or class information and spiritofdance.billing@gmail.com to email any invoicing and accounting questions that pertains to my child for the period of June 2022 to September 2023.

PLEASE READ AND SIGN AT THE BOTTOM

I understand that all tuition fees are due promptly according to my payment schedule. On the 2nd of every month, any accounts that have not made the required monthly payment will incur a \$25.00 late fee. 3% monthly interest will be charged to overdue accounts after 14 days of non-payment.

I understand that if I am not paying in full upon registration, I will have monthly installments due, either by payment in person, e-transfer or automatic withdrawal from a credit card. The monthly payments (or bimonthly if preferred) will be divided by the number of payments dates between.

I understand that the registration fee is non-refundable (\$20 per student and \$10 per any additional family member-not to exceed \$50.00) and it is due upon registration (credits may not be applied to this fee).

I understand that once the dance season has commenced, I will have 2 weeks to withdraw from a registered class to receive a refund (less the registration fee, \$15/class, plus HST). After that time, Spirit of Dance will be happy to place your child in a different class or offer a credit, if applicable.

I understand any changes made to my tuition invoice after the 2-week trial period, will incur a \$25.00 administration fee.

I understand that classes will not be pro-rated.

I understand that each discipline of dance will perform a routine in our year-end recital, and therefore, will have a costume that can either be purchased or fundraised. The costume invoice will be due by December 1st, 2022. Costumes will vary in prices anywhere from \$75 to \$150.

I understand that I will receive a student handbook that will outline important dates and information, including recital, photo dates, competition dates etc. I will receive information about the fundraising program available to our dancers. I understand that my child will need to wear the proper attire and footwear for class. (Information will be provided in a student handbook.)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Non-Payment Policy: These Terms and Conditions represent the entire payment agreement (Full year tuition). This Agreement is binding upon the parties and their successors. CLIENT may not amend the full payment agreement after the 2-week trial period. After the 2-week trial period, the client understand they may change classes or have a credit provided. CLIENT has carefully read the entire Agreement and understands the meaning and effect of each, and every provision of this Agreement. CLIENT is duly authorized and empowered to accept these Terms and Conditions. Signature from all parties involved in paying this account:

Mother: \_\_\_\_\_ Date: \_\_\_\_\_

Father: \_\_\_\_\_ Date: \_\_\_\_\_

Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

CLASSES	DAY/TIME	COST	SELECTION
Adult Recreational Ballet	Thursday 7:45-8:30	\$375.00	
Adult Competitive Jazz	Tuesday 9:00-9:45	\$375.00	
Adult Competitive Musical Theatre	Tuesday 8:15-9:00	\$375.00	
Adult Competitive Hip Hop	Monday 7:30-8:15	\$375.00	
UNLIMITED PACKAGE		\$1100.00	

STATUS CARD NUMBER: (if applicable) \_\_\_\_\_

Please note: all accounts are charged a registration fee and HST.

Studio Section: (please leave blank)

Package Price	
Discounts (10% off if single student registered, 30% off if 2 or more children registered)	
Registration Fee (\$20/adult, \$10/adult if child is registered)	
Sub-Total	
HST (13%)	
Grand Total	

#### PAYMENT OPTIONS

An invoice will be sent to you from spiritofdance.billing@gmail.com with your Invoice Breakdown and Total. This email will also set up your payment plan. Payment Options include Cash, Debit, E-transfer, Visa or Mastercard. Receipts will be available at the desk, as well as confirmation of payment VIA email. Please select one of the following:

Pay in Full                       4 month payment plan                       8 month payment plan)

If you are doing a payment plan, please note any payments made between June 1st and August 31st, 2022 will be deducted from your final tuition amount and monthly payments will be determined from the new outstanding total as of September 1st, 2022. Example: Total Tuition \$3000.00 (\$500 paid in the summer). \$2500 divided by the monthly plan (4 or 8 month options). Pre-payment per month is required to continue lessons.

If you wish to pay VIA credit card, and would like it put on file, please fill out the following:

Visa or MC # \_\_\_\_\_ exp. date \_\_\_\_\_ Security code: \_\_\_\_\_ (3 or 4 digit code)

Signature: \_\_\_\_\_