DANCE INCORPORATED

ALL THE ARTS UNDER ONE ROOF

Summer 2026 Registration form

Class(es) Day & Time_____Reg. Fee _____Payment Method_____
Students Name_____Birthdate_____
Parent/Guardian's Name (print)_____
Address_____City, State & Zip Code_____
Cell Phone_____E-mail_____
Emergency Contact (Name, Phone & Relationship)_____
How did you hear about Dance Inc?_____

*Tuition is due at the start of our summer session. Accounts that are not paid in full within the first three weeks of class will have a late fee of $10 applied..
*There is a $25 fee for returned checks.
*Dance Inc. reserves the right to alter placement of students and reschedule classes.
*I waive and release Dance Incorporated Center for The Arts and its employees form any claims resulting in injury, damage, or other suffering by me or my child as a result of instruction, activities, performances or other.
*I will be responsible for bringing my child(ren) into the center and picking up my child(ren) inside the center. I will not drop my child(ren) at the door. I will reinforce with my child(ren) the importance of remaining inside the center until I arrive. I will also be responsible for any other children I bring to the center. I will not hold Dance Inc. or its employees responsible for watching my child(ren) until I arrive.
*I have read the brochure for additional information and have read the calendar for events and closings.
*I am aware that additional information may be posted to the website: www.danceinconline.com
*In the event of inclement weather, always call the studio for information.
*It is sometimes necessary for Dance Inc to expel a child from the center.The decision to do so may be based on failure to pay tuition, distruptive or dangerous behavior, abuse of other children, staff or property by the child and/or parents, violation of Dance Inc policies and/or other deemed appropriate by Dance Inc. Students (18 and older) or the parents/guardians will be responsible for any legal collections or otherwise resulting from such termination.
*If account goes into collections, any and all fees associated with the collection process (legal or otherwise) will be the student's (18 & older) parents/gaurdians responsibility.
*I grant permission for myself and/or my child to be photographed and/or videotaped and also used in possible advertisements.
*I give my permission for my child(ren) to be taken to the nearest hospital in case of extreme emergency.

*Please join GroupMe by scanning the QR code at the front desk. Also, follow us on social media for updates.

Parent/Guardians's signature_____

Staff Use Only : JR_____QB_____ML_____GM_____