

Avery Ballet LLC

1812 Main Street #C202A Fredericksburg, VA 22408

Averyballet.com

REGISTRATION APPLICATION

Student's Name _____ DOB _____

Address _____
Number/Street _____ City, State, Zip _____

Parent/Guardian Name _____

Cell Phone Number/Alternate Number _____

Parent Email Address _____

EMERGENCY CONTACT

#1 Name _____ Phone Contact (cell/home) _____

Relationship to student _____

#2 Name _____ Phone Contact (cell/home) _____

Relationship to student _____

FINANCIAL AGREEMENT

I understand that tuition is due by the 10th day of the month and if payment is not made, a \$20.00 late charge will be added after this date and until paid, the student will not be allowed to participate in classes. I understand \$25.00 fee will be charged for returned checks.

In consideration for services provided to me by Avery Ballet, I agree to pay all fees and charges for such services promptly upon presentation thereof. Should my account be referred for collection, I agree to pay all costs of collection, including agency fees, court costs, and attorney fees.

Signature _____ Date _____

RELEASE

I understand that with any dance program some risks are involved, even though every precaution is taken to prevent injury. Therefore, I hereby waive and release Avery Ballet LLC from all claims for damages or injuries in connection with dance training.

Signature _____ Date _____

I understand and agree to adhere to all the content stated in the Student Handbook including: Studio Policies, Tuition & Payment Information, Dress Code, and expected etiquette. I agree to be responsible for reading studio correspondence and respecting deadlines as applicable. I acknowledge that I have read the statements above and agree to participate accordingly.

Signature _____ Date _____

New Students: How did you hear of Avery Ballet/who referred you?