



2016 -2017 CLASSES

September 2016-May 2017

\$35 Registration Fee

2.5 YEAR OLD CLASSES

*45 MINUTES

TUESDAY 4:00PM

- WEDNESDAY 3:45 PM
- THURSDAY 4:00PM

3 YEAR OLD CLASSES

- MONDAY 4:00PM
- TUESDAY 10:30AM
- TUESDAY 5:00PM
- THURSDAY 1:00PM (3-4 yrs.)
- THURSDAY 5:00PM (3-4 yrs.)
- SATURDAY 9:30AM (3-4 yrs.)

4 YEAR OLD CLASSES

- 4/5 HIP HOP WEDNESDAY 4:30PM*45 MINUTES
- TUESDAY 1:00PM
- TUESDAY 5:00PM
- THURSDAY 1:00PM (3-4 yrs.)
- THURSDAY 5:00PM (3-4 yrs.)
- SATURDAY 10:30AM (3-4 yrs.)

5/6 YEAR OLD CLASSES

MONDAY

- 4:00PM HIP HOP
- 5:00PM TAP/JAZZ

TUESDAY

- 4:00PM TAP/JAZZ
- 5:00PM BALLET

WEDNESDAY

- 4:00PM 5/6 HIP HOP
- 5:00PM TAP/JAZZ/ BALLET

FRIDAY

- 4:00 BOYS HIP HOP
- 4:00 TAP, JAZZ, BALLET
- 5:00 HIP HOP

SATURDAY

- 9:30AM HIP HOP
- 10:30AM TAP/JAZZ
- 11:30AM BALLET

7/8 YEAR OLD CLASSES

MONDAY

- 4:00PM TAP/JAZZ
- 5:00PM HIP HOP

TUESDAY

- 4:00PM BALLET
- 5:00PM TAP/JAZZ

WEDNESDAY

- 4:00PM BALLET/LYRICAL
- 5:00PM HIP HOP

THURSDAY

- 4:00PM HIP HOP

FRIDAY

- 4:00 ALL BOYS HIP HOP

SATURDAY

- 10:30AM HIP HOP

9/10 YEAR OLD CLASSES

MONDAY

- 5:00PM TAP/JAZZ
- 6:00PM HIP HOP
- 7:15PM TAP

TUESDAY

- 6:00PM HIP HOP
- 6:00 PM BALLET
- 7:00PM STRETCH, LEAPS & TURNS

WEDNESDAY

- 5:00PM TAP/JAZZ-
- 6:00PM BALLET/LYRICAL

THURSDAY

- 5:00 HIP HOP-
- 6:00PM BALLET/LYRICAL

11/12 YEAR OLD CLASSES

MONDAY

- 6:00PM TAP/JAZZ
- 7:15PM TAP

TUESDAY

- 6:00PM HIP HOP
- 6:00 BALLET
- 7:00PM STRETCH, LEAPS & TURNS

WEDNESDAY

- 6:00PM BALLET/LYRICAL

- 7:00PM HIP HOP

THURSDAY

- 6:00PM HIP HOP
- 7:00PM BALLET/LYRICAL

TEEN CLASSES

MONDAY

- 6:15PM ADVANCED TAP
- 7:00PM HIP HOP

TUESDAY

- 7:00PM HIP HOP
- 7:00PM BALLET
- 8:00PM TAP/JAZZ *1.5 HOURS

WEDNESDAY

- 6:00PM HIP HOP
- 7:00PM LYRICAL *1.5 HOURS

THURSDAY

- 7:00PM HIP HOP



2016-2017 FALL Class Registration Form

Student Name: _____

Student Address: _____

City: _____ State: _____ Zip: _____

Bill to address (if different from above): _____

*Parent E-mail (required): _____

Home Phone: _____ Birth date (required): _____

Father's Name: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____

Mother's Name: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____

Emergency Contact: _____ Phone: _____

Allergies/Medical Information we should be aware of: _____

PARENT AGREEMENT

FAMILY NAME: _____

The undersigned, heirs, executors and administrators waive and release any and all claims against Studio L, its agents, servants and employees, for any personal injury sustained out of participation in any classes, rehearsals, performances, or on the premises of Studio L.

I certify that my child is in good health and I understand that participation in classes involves physical movement and execution. I understand and agree to adhere to the Student and Parent Conduct Code in the Parent Guide. I agree to provide medical insurance for my child and family. If my emergency contact cannot be reached, I give permission to the staff of Studio L to render aid or to act in my behalf to obtain emergency medical treatment for this student for any illness or injury that may occur while attending classes, rehearsal, performances, or on the premises.

I understand that I must pay for all classes that I register for here at Studio L and observe the late fee of \$5.00 per month for all missed payments regardless of the reason. I understand that payment should reach Studio L on time due (the 15th of the month), even if I'm absent from class the day it is due. If my payment is overdue my credit card (that I have provided) will be auto charged for the full amount due and a \$5.00 late fee will be added.

In addition, I understand that I am registering for September-May and if I choose to drop a class, after October 15th, there will be no refund due to me and I agree to pay for the entire season as my registration holds a secure spot in class. However, I may drop a class and receive a prorated refund prior to October 15th. If I do choose this option and drop a class, I will notify the office in writing by mail or email on or before October 15th, or at the office. If I fail to do so, I understand that I will be registered in the class and the spot will be held until I notify the office of the withdrawal in writing as previously stated. After October 15th, there are NO refunds or credits given. Late registrations have up to 4 weeks from the day of registration to drop for a prorated refund. After that time, NO refunds will be given and I understand I must pay for the season in its entirety. I understand that all checks should be made payable to STUDIO L and that I will be charged a service fee of \$35.00 for every bounced check I write. Also, I will be asked to pay in cash for the check I wrote as well as the service charge.

I understand that tuition is due in full or in 3 payments. If I elect the "3 Payment Plan" I understand that I will not be charged installment interest. I understand that all registration fees of \$35 per student are non-refundable. I understand that failure to pay tuition, late fees, or miscellaneous charges may result in termination of my child's participation in their class (es) until such a point that my account is made current.

I understand that STUDIO L does NOT issue refunds for any reason, including missed classes due to illness, vacation, religious observance, inclement weather or withdrawal. Any missed classes can be made up in another age appropriate class during the season, subject to enrollment and availability. Refunds will not be given for costumes, tights, or any other items purchased at STUDIO L.

PRINT NAME _____ SIGNATURE _____ DATE _____

TOTAL CLASSES _____ **TOTAL COST** _____

Credit Card: **Visa** | **MC** | **Disc**

Acct # _____

Exp. Date _____ / _____ **V-code** (on back of card) _____ **Cash/Check #:** _____

Signature _____