

781 Shiloh Pike  
Bridgeton, NJ 08302  
(856) 451-2233

*Imagine...Believe...Achieve*

On the web: [www.allthatdance-nj.com](http://www.allthatdance-nj.com)  
Email: [allthatdancestudio@comcast.net](mailto:allthatdancestudio@comcast.net)



Please complete both sides of this form, sign the consent waiver, and return to the studio.

Mother/Guardian's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address \_\_\_\_\_ City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_ ext. \_\_\_\_\_

Father/Guardian's Name: \_\_\_\_\_ Email address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_ ext. \_\_\_\_\_

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School \_\_\_\_\_ Grade: \_\_\_\_\_

In case of an emergency, call: \_\_\_\_\_ at (\_\_\_\_) \_\_\_\_\_

Medical concerns: Medical Allergies \_\_\_\_\_ Food Allergies: \_\_\_\_\_

Epilepsy \_\_\_\_\_ Other: \_\_\_\_\_

Class Level: \_\_\_\_\_ Class (es) \_\_\_\_\_

Number of years dancing \_\_\_\_\_ Number of years dancing in our studio \_\_\_\_\_

How did you hear about our studio?  Friend\*  newspaper ad  flyer  yellow pages  website

Facebook  Attended recital/performance  street sign  other: \_\_\_\_\_

\*Please list name of friend: \_\_\_\_\_

Make checks payable to: All That Dance Studio. Paid by:  check/no \_\_\_\_\_  cash  credit card

Credit Card on file for monthly charges? Yes No

Monthly Tuition Fee: \_\_\_\_\_

Registration: \$35.00 \_\_\_\_\_ Individual \$40.00 \_\_\_\_\_ Family



**CONSENT FORM for 2020-2021**

**Please read this carefully. You are registering your child or self for participation in dance or fitness class and you are waiving and releasing all claims for injuries you or your minor child might sustain.**

In the event of an emergency, I authorize the agents of *All That Dance Studio* to administer or use their discretion in securing medical treatment. I understand that every effort will be made to contact the child's parent, guardian, or emergency contact if an emergency occurs. I hereby release *All That Dance Studio* and its teachers from all liabilities for injuries or damages arising out of personal injury of any kind.

Instruction and Contact Consent: *All That Dance Studio* incorporates teaching methods used internationally. There may be times that the teachers may need to touch the child to ensure proper body alignment, turn-out, and placement. I give my permission for this instructional contact to be made as part of my training/my child's dance training. I understand that it is my responsibility to observe my child's dance instruction and I will report any concerns immediately.

I hereby grant permission for my name/ my child's name to be published in the studio's newsletters or in local newspapers as a result of participating in dance related activities. I hereby grant my permission for my child or self to be photographed or videotaped at any dance related events (parades, performances, class activities, etc.). Photographs may be published in the studio's newsletters, in local newspapers, or displayed in the studio. Students (including adults) will be videotaped during the recital and/or other dance related activities.

Students, siblings, and their parents/guardians are expected to demonstrate courtesy and respect to *All That Dance Studio's* staff, its dance students, and students' parents/guardians, and customers. Students and/or their parents/guardians may not publish disparaging or harassing remarks on social media sites about *All That Dance Studio*, its board members, faculty, staff, students or their families. Any action such as: harassment, intimidation, threatening or bullying comments towards an individual or to the studio will be addressed immediately. Failure to abide by this policy may result in dismissal.

Correspondences/notifications will be sent to you by email. *All That Dance Studio's* website, [allthatdance-nj.com](http://allthatdance-nj.com) and its Facebook page, <https://www.facebook.com/All-That-Dance-Studio> contain educational and informational updates and they are an efficient means of communication. To stay informed, peruse these sites. During inclement weather events, call the studio, (856) 451-2233, and listen to the recording.

Monthly tuition payments are due on the first day of each month (September to May) and it is the same amount for each month, September to May. Some months may have three weeks due to holidays or weather related events. Missed classes for inclement weather days, illness, bereavement, or for a religious holiday may be made up during the year. Tuition is not pro-rated due to missed classes and there are no refunds for missed classes. There is no tuition charged for the month of June.

A \$15.00 late fee will automatically be applied on the 11<sup>th</sup> day. If your account is delinquent more than 30 days, your child will be unable to participate in class.

Costume fees per class (\$68.00 for child and \$72.00 for adult sizes) will be billed separately beginning in October and must be paid in full by January 15, 2021. A \$25.00 charge will automatically be applied to your account for returned checks (NSF).

*All That Dance Studio* accepts cash, credit cards, and personal checks. Checks may be mailed to:

**All That Dance Studio**  
**781 Shiloh Pike**  
**Bridgeton, NJ 08302**

A withdrawal form, located in the office, must be completed and submitted to the office on or before the first of the month to avoid being charged the tuition fee or you may send an email to the studio. Please do not tell the teachers or call the studio to withdrawal your child from dance. This must be done in writing to stop incurring additional fees.

**Covid-19** We are committed to follow the CDC and the NJ Department of Health's guidelines to ensure a safe and healthy place for your child to learn. You may elect to have your child attend our virtual classes or in-studio classes. If we are ordered to cease offering in-studio classes, we will transition all of our classes to Zoom classes

By my signature below, I certify that I am or my minor child is physically able to participate in *All That Dance Studio's* classes and do hereby agree that this corporation, board of directors, employers, contractors, assistant teachers are not responsible or liable to me or to my minor child for any personal injury, accident, and/or loss or damage to personal property. I do hereby release this corporation, board of directors, and its employees, contractors, assistant teachers, and agents from any claim or cause of action which may have occurred as a result of my minor child's participation or my participation in classes or as a result of any medical problems known or unknown which may occur in the future. I agree to waive and relinquish all claims I or my minor child may have against *All That Dance Studio*. I understand the fees and tuition policy and agree to the payment procedures.

I have read and fully understand the above waiver.

Parent's Signature for participants under 18 years or Signature if over 18 years:

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