



Reg. No. \_\_\_\_\_

### REGISTRATION FORM

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date Month Year

Student's Legal Name \_\_\_\_\_  
Last First Middle

Full Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex:  Male  Female E-mail: \_\_\_\_\_  
Date Month Year

Guardian Name: \_\_\_\_\_ Relation \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Which day & time would you like to join? Day \_\_\_\_\_ Time \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_

Why would you like to join Adityas:  Fitness  Family Event  Career  Shyness  Other \_\_\_\_\_

Term:  Short  Long Other Activities:  Soccer  Swimming  Music  Martial Arts  Other \_\_\_\_\_

Where did you hear about us? \_\_\_\_\_

Does student have any medical conditions?  Yes  No. If yes, please explain \_\_\_\_\_

#### TERMS & CONDITIONS

##### General Studio Rules:

1. Adityas is not responsible for any injury or loss incurred due to activities and/or travel to and/or from events held by the studio.
2. Please do not send your child to class if they are seriously sick or if they have a contagious illness.
3. Parents are responsible for picking up their child immediately after their dance class. Adityas will not be held responsible for students once they have finished classes and have left the facility. Dancers are encouraged to wait inside for their parents. Please pick up your child promptly.
4. Parents are to remain outside of the classroom at all times.
5. Videotaping the classes is not allowed under any circumstances to respect the privacy of other children.
6. Dancers are expected to respect the dress code. Dancers MUST wear Adityas T-shirt, runners, and sweat/track pants.
7. Adityas does not tolerate fighting, bullying, theft or vandalism. Dancers and Parents are expected to demonstrate and encourage positive behavior and attitudes. If there is a concern that you as the parent would like to discuss with a teacher or the Director, please speak with the receptionist, or email the studio, to set up an in person or phone meeting.
8. There is to be no food or drink in any areas of the studio except for the lobby. Only water is permitted in the dance rooms.
9. Please notify the studio of any changes to your phone number, address or any other important information.
10. Adityas reserves the right to use all photography/videography taken by or for Adityas for advertising and/or promotions of any kind.
11. If pregnant, please consult your doctor before attending a class. Doctor's note required.
12. Please be advised that All / some phone calls and conversations may be recorded security & training purposes.

##### Tuition/Payments:

1. There will be a one time registration fee of \$45, unless account is inactive over 3 months, then the fee must be paid again to reactivate.
2. Fee is due on the 1st day of every month.
3. There is a \$10 service charge for any missed or late payments.
4. There is a \$15 service charge for accounts to be temporarily put on hold.
5. 30 days written notice is required for the cancellation or discontinuance of account. If you fail to notify the studio, you will be charged for the classes until the notice is received. If you miss a class, you still pay for that class.

**DECLARATION:** I accept all the terms and conditions mentioned above & I shall be responsible for any misconduct.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Parent's Guardian's Signatures required  
if under 19 years of age

## Credit Card Authorization Form

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION AND RETURN TO US.  
All information will remain confidential.

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Personal ID: \_\_\_\_\_

Credit Card Type: \_\_\_\_\_ Visa \_\_\_\_\_ Mastercard

Credit Card Number: \_\_\_\_\_

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

Card Identification Number (last 3 digits located on the back of the credit card): \_\_\_\_\_

Prorate Charges \$ \_\_\_\_\_ (CAD) Monthly Charges \$ \_\_\_\_\_ (CAD)

I authorize Adityas to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

I understand that payment will be charged to my credit card at the 1st of every month. To stop payment, I will give 30 days advance written notice. Please note that by signing this form I also understand that there are no refunds, credits, make up or extensions for missed classes.

**DECLARATION:** I accept all the terms and conditions mentioned above & I shall be responsible for any misconduct.

Signature \_\_\_\_\_ Date \_\_\_\_\_

***adityas***  
DANCE MUSIC FILMS