



Please Complete One Form Per Student, Include the appropriate fee and make checks payable to "The Dance Haven, Inc." Mail to 379 Salem Street, Medford, MA 02155

PLEASE PRINT IN INK

Student Information:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_\_

Classes Registered For \_\_\_\_\_  
\_\_\_\_\_

Regular Season - Amount Paid + Registration Fee \$25 \_\_\_\_\_

Summer Camp / Intensive Fee + Registration Fee \$10 Amount: \_\_\_\_\_

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

Dance Experience If any: Please list the types of dance and years, Ex: Ballet, 3 yrs. 2001-2004

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Home Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Work Telephone \_\_\_\_\_ Work Email \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Home Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Work Telephone \_\_\_\_\_ Work Email \_\_\_\_\_

EMERGENCY CONTACT NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

EMERGENCY CONTACT PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

Do you/your child have any medical/physical disabilities that limit participation?

If yes please describe below in the Medical History.

- Yes
- No

I acknowledge that I/my child is fit and capable of participating in classes. Each student may decline to participate in any activity, which may be personally harmful and is also responsible to inform the instructor of any physical limitations that may prevent full participation in class. The Dance Haven and the instructors are not liable for personal injuries or loss or damage to personal property. I waive all rights for claims against The Dance Haven, or it's staff or Instructors for damages or injuries that may occur while I participate in activities. I agree to pay any costs and penalties should my account become delinquent and a collection agency is necessary to recover any monies owed by me.

Student Signature or Parent/Guardian if Under18

\_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

**Medical History:** All Students or Parents/Guardians are encouraged to complete this optional medical history form. The Dance Haven will provide this information to emergency service personnel caring for your child. The Dance Haven nor its staff or instructors does not assume the responsibility of verifying or updating the information provided. Students or Parents/Guardians are urged to inform The Dance Haven of any changes in the physical condition of you/your child.

Serious Diseases: \_\_\_\_\_

Allergies: \_\_\_\_\_

Medications: \_\_\_\_\_

Hospitalizations: \_\_\_\_\_

Physicians: \_\_\_\_\_

Additional Information: \_\_\_\_\_

**THE DANCE HAVEN, INC.  
REGULAR SEASON 2016-2017  
FEES & POLICIES AGREEMENT**

**PLEASE READ AND SIGN ALONG WITH REGISTRATION FORM**

**REGISTRATION FEES:** Returning students who register before August 31, 2016 for Regular Season there is no Registration Fee per family. New or Returning students who register before September 10, 2016 the registration fee is \$20.00 per family. Students who enroll after September 10, 2016 there is a \$25.00 Registration Fee per family. **REGISTRATION FEES ARE NON REFUNDABLE.**

**TUITION:** Regular Season Tuition may be paid in Two Installments per year or divided into 10 Automatic Payments made monthly. The first installment is due upon registration. 9 Monthly Installments will be automatically deducted from a checking account or credit card provided on the 25th of each month starting September 25, 2016. **TUITION PAYMENTS ARE FINAL AND NON REFUNDABLE. FOR ½ YEAR TUITION PAYMENTS THERE IS NO REFUND BUT WILL RECEIVE A CREDIT TOWARDS FUTURE CLASSES ONLY.**

If paying in Two Installments, the first installment is due upon registration, the second will be automatically deducted on January 1st from an authorized checking or credit card account, a \$10.00 discount per class will apply for payments received before September 15, 2016.

There is a \$25.00 Fee for any returned checks or for non sufficient funds.

**LATE FEES OF \$10.00 PER WEEK WILL BE ADDED FOR ACCOUNTS PAST DUE AND STRICTLY ENFORCED.**

**IF TUITION IS OVER TWO MONTHS PAST DUE, A STUDENT WILL NOT BE ALLOWED TO DANCE. AS ALWAYS PAYMENT ARRANGEMENTS CAN BE MADE.**

The Dance Haven reserves the right to dismiss any student whose tuition is not being paid. The Dance Haven relies on our tuition fees to run our business efficiently, so that the students receive top quality dance education. We appreciate your timely payments, your business and cooperation.

**FAMILY TUITION BREAK A:** For families enrolled in 5 or more hours of dance ONLY. Two siblings enrolled will receive a \$200 discount on the total tuition. Three siblings enrolled will receive \$300.00 discount on the total tuition. Four siblings enrolled will receive \$400.00 of total tuition.

**FAMILY TUITION BREAK B:** FOR FAMILIES ENROLLED IN LESS THAN FIVE HOURS OF DANCE. Two siblings enrolled will receive a \$50 discount on the total tuition. Three siblings enrolled will receive \$100.00 discount on the total tuition. Four siblings enrolled will receive \$150.00 of total tuition.

**REGULAR SEASON TUITION COSTS PER STUDENT:** Calculate tuition by adding the total number of hours of lessons per week per dancer. The more hours you study, the less you pay per hour. A written notice of withdrawal must be received prior to installment due date. **TUITION FEES ARE NON REFUNDABLE.**

<b>45 min.</b> \$400/year	<b>3 hours:</b> \$1260/year	<b>5 hours:</b> \$1980/year
<b>1 hour:</b> \$450/year	<b>3 ¼ hours:</b> \$1370/year	<b>5 ¼ hours:</b> \$2070/year
<b>1 ¼ hours:</b> \$560/year	<b>3 ½ hours:</b> \$1480/year	<b>5 ½ hours:</b> \$2160/year
<b>1 ½ hours:</b> \$670/year	<b>3 ¾ hours:</b> \$1590/year	<b>5 ¾ hours:</b> \$2240/year
<b>1 ¾ hours:</b> \$790/year		
<b>2 hours:</b> \$850/year	<b>4 hours:</b> \$1590/year	<b>6 hours:</b> \$2250/year
<b>2 ¼ hours:</b> \$960/year	<b>4 ¼ hours:</b> \$1700/year	<b>Unlimited:</b> \$2620/year
<b>2 ½ hours:</b> \$1070/year	<b>4 ½ hours:</b> \$1810/year	
<b>2 ¾ hours:</b> \$1180/year	<b>4 ¾ hours:</b> \$1920/year	

**RECITAL:** The recital will be held at the end of each regular season. Dates of this event will be advertised at a later date and will be posted before January 1st. It is up to parents and guardians to make sure they do not schedule any other events during this time that may interrupt the dancers' performance dates. Ticket prices will be advertised at a later date. Each student family will need to purchase a minimal amount of tickets based on enrollment and announced before ticket day. All attendees need to purchase a ticket, Infants will receive a free lap ticket if under the age of one year, it is the LAW, and we need to account for everyone attending the recital. There are no exceptions to this rule. Anyone without a ticket will not be allowed in the event location. The Dance Haven is attentively looking into June to hold their annual recital. A recital and dress rehearsal date will be posted by January.

**COSTUMES:** Costumes will be ordered in November. Average costume prices range from 50.00 to \$70.00 per costume. A costume cannot be ordered without a costume payment; therefore, we will assume that a student is not planning to participate in the annual recital. Performance is considered the final phase of the year's dance training, as we recommend all our students to dance in the show, we realize that sometimes it is not possible. Please be sure to communicate any questions or concerns to your child's instructor. Tights and Undergarments are also required and will be ordered through The Dance Haven in January. Information will be provided regarding requirements

**COSTUME FEES:** COSTUME DEPOSITS ARE NON REFUNDABLE AND DUE OCTOBER 1st . FINAL COSTUME DEPOSITS ARE DUE NOVEMBER 1ST, COSTUME BALANCES MUST BE PAID IN FULL BY NOVEMBER 1ST. WE WILL NOT ORDER COSTUMES UNLESS BALANCES ARE PAID IN FULL. IF A COSTUME BALANCE IS NOT PAID WE CAN NOT GUARENTEE A STUDENTS COSTUME WILL BE AVAILABLE FOR COMPETITION OR RECITAL. A SHIPPING CHARGE WILL BE APPLIED IF YOU ORDER YOUR COSTUME SEPARATELY. WE ORDER COSTUMES BEFORE THE NEW YEAR SO THAT WE CAN GUARENTEE THEIR ARRIVAL FOR COMPETITION & RECITAL. THE DANCE HAVEN CAN NOT BE RESPONSIBLE FOR PURCHASING COSTUMES FOR STUDENTS WITH UNPAID BALANCES. BALANCES WILL BE BILLED OUT IN NOVEMBER FOR YOUR FINAL PAYMENT.

THE FOLLOWING DEPOSITS ARE DUE PER STUDENT BY OCTOBER 1ST 2016.  
FINAL DEPOSITS ARE DUE NOVEMBER 1ST.  
1 HR CLASS - \$50.00 DEPOSIT  
1.75 / 2 HR CLASS = \$100 DEPOSIT  
3 – 4 HRS = \$150.00 DEPOSIT  
5-6 HRS = \$250.00 DEPOSIT  
RDT STUDENTS = \$300.00 DEPOSIT

THE DANCE HAVEN IS COMMITTED TO PROVIDING EXCELLENT DANCE EDUCATION IN A CLEAN, FRIENDLY, FAMILY ORIENTED ENVIRONMENT. THE POLICIES AND RULES ARE TO ENSURE THAT ALL DANCERS GET THE EDUCATION THEY DESERVE. WE HOPE YOU ENJOY THE DANCE SEASON AND LOOK FORWARD TO A FUN AND EXCITING DANCE YEAR.

POLICIES: I HAVE TAKEN THE TIME TO READ THE DANCE HAVEN'S MISSION AND POLICIES POSTED ON [WWW.THEDANCEHAVEN.COM](http://WWW.THEDANCEHAVEN.COM) AND POSTED ON THE DANCE HAVEN BULLETIN AND UNDERSTAND ALL RULES POLICIES OF THE DANCE HAVEN.

PLEASE INITIAL \_\_\_\_\_

*I agree to the terms of The Dance Haven's tuition fees, costumes fees and policies and that upon registration I have made a commitment to these fees and policies.*

Student(s) Enrolled – Please List

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Parent/Guardian or Adult Student \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

# Automatic Payment From Your Credit Card

## TERMS OF AGREEMENT

I am authorizing THE DANCE HAVEN, INC. to charge my credit card account in the amount of the pledge I have indicated (circle the name of program) – **MONTHLY, BI-YEARLY, YEARLY**. I am in agreement with the tuition policies stated by THE DANCE HAVEN, INC. \_\_\_\_\_(initial here)

This agreement will remain in effect until I have given THE DANCE HAVEN, INC. at least thirty (30) days written notice of its termination. A record of each payment will appear on my credit card statement and will serve as my receipt.

**PLEASE CHECK ONE:**     VISA     MasterCard     Discover

Automatic payment amount: \$ \_\_\_\_\_

Credit card #: \_\_\_\_\_

Security code # \_\_\_\_\_

Expiration date: \_\_\_\_\_

Signature: \_\_\_\_\_

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

### Please complete the following information:

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

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

City/State/Zip: \_\_\_\_\_

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

Email: \_\_\_\_\_

To change payments to a different credit card you must resend this form 30 days prior to your scheduled payment.

**The Dance Haven, Inc.**  
**379 Salem Street, Medford, MA 02155**  
**781-391-0677**  
**[www.thedancehaven.com](http://www.thedancehaven.com)**