WINTER SESSION 2020 - STUDENT REGISTRATION FORM

Student’s Name:  
Name of Parent or Guardian:  
Date of Birth (MM/DD/YYYY):  
Date:  
Primary Phone:  
Phone (2):  
Mailing Address:  
Primary Email Address:  
Name of Student’s School:  
Grade:  
Address/Phone Number of School:  

HEALTH & ACCESSIBILITY NEEDS

Allergies:  
Does your child have accessibility needs? (Yes/No)  
If yes – Explain:  
Will your child require any special medical attention during a normal class? (Yes/No)  
If yes – Explain:  

EMERGENCY CONTACT INFORMATION

Name:  
Relationship:  
Primary Phone:  
Phone (2):  

LEGAL RELEASE AND POLICY ACCEPTANCE

☐ I/we understand the School Policies  ☐ I/we understand my billing obligations  
☐ I/we waive all liability for injuries  ☐ I/we understand the cancellation & refund policies  
☐ I/we give media use rights permission  ☐ I/we understand the schedule  

___________________________________  ______________________________
Signature (Parent/Guardian for Minors)  Date

For more information, contact Matthew Bowman at 216-432-0306 or by email, school@dancingwheels.org

Dancing Wheels Company & School • 3030 Euclid Ave, Suite 100 • Cleveland, OH, 44115
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## CLASS SCHEDULE:
14 Weeks – January 20, 2020 through May 2, 2020

<table>
<thead>
<tr>
<th>Day</th>
<th>Time</th>
<th>Class</th>
<th>Instructor(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>5:00-6:00pm</td>
<td>Voice/Acting (AB)</td>
<td>AB</td>
</tr>
<tr>
<td>Monday</td>
<td>6:00-7:00pm</td>
<td>A/T Hip Hop (AB)</td>
<td>AB</td>
</tr>
<tr>
<td>Tuesday</td>
<td>5:30-7pm</td>
<td>Contemporary (CK)</td>
<td>CK</td>
</tr>
<tr>
<td>Wednesday</td>
<td>5:30-6:30pm</td>
<td>A/T Tap (SLS)</td>
<td>LTA</td>
</tr>
<tr>
<td>Thursday</td>
<td>5:30-6:30pm</td>
<td>Yoga (MB)</td>
<td>MB</td>
</tr>
<tr>
<td>Saturday</td>
<td>10-11am</td>
<td>Youth Hip Hop (AB)</td>
<td>AB</td>
</tr>
<tr>
<td>Saturday</td>
<td>11-11:45am</td>
<td>Creative Movement (Ages 3+) (AB)</td>
<td>AB</td>
</tr>
<tr>
<td>Saturday</td>
<td>12:30-1pm</td>
<td>Wheelchair Technique (MB)</td>
<td>MB</td>
</tr>
<tr>
<td>Saturday</td>
<td>1-2:30pm</td>
<td>Performance Ensemble (MB)</td>
<td>MB</td>
</tr>
<tr>
<td>Saturday</td>
<td>10-11am</td>
<td>Open Ballet (MB)</td>
<td>MB</td>
</tr>
<tr>
<td>Saturday</td>
<td>11-12pm</td>
<td>Jazz Funk (LTA)</td>
<td>MB</td>
</tr>
</tbody>
</table>

**Instructors:**
- AB - Andrea Belser
- MB - Matthew Bowman
- CK - Cody Krause
- LTA - L. Taylor Ashton
- DP - Dominique Patton
- SLS - Sara Lawrence-Sucato

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## CLASS SELECTIONS:
(check all classes for which student is registering)

- Voice/Acting 5pm Monday
- A/T Hip Hop 6pm Monday
- Contemporary 5:30pm Tuesday
- A/T TAP 5:30pm Wednesday
- Yoga 5:30pm Thursday
- Youth Hip Hop 10am Saturday
- Open Ballet 10am Saturday
- Creative Movement (3+) 11am Saturday
- Jazz Funk 11am Saturday
- Wheelchair Technique 12:30pm Saturday
- Performance Ensemble 1pm Saturday

**For more information, contact Matthew Bowman at 216-432-0306 or by email, school@dancingwheels.org**
**TUITION**

1 class/week = $10/class  
2 classes/week = $9.50/class  
3 classes/week = $9/class  
4 classes/week = $8.50/class  
5 classes/week = $8/class  

Unlimited classes = $650 total (for the 14-week session)  
Drop-in Rate: $15/class

### Discounts

**Refer a Friend!**  
Refer a friend to the School and receive a voucher for $20 toward tuition for that session.

**Family Discounts**

<table>
<thead>
<tr>
<th></th>
<th>2 Children 15% OFF</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>3 Children 25% OFF</td>
</tr>
<tr>
<td></td>
<td>4+ Children 30% OFF</td>
</tr>
</tbody>
</table>

* Discounts apply to total cost of tuition for each session.

**Payment Plan:** 
(Tuition can be spread out into monthly payments with a commitment to the entire session. A one-time payment plan fee of $10 will be applied.)

**Tuition:**

(# of classes x tuition cost found above x 14 weeks)

**Discounts:**

(subtracted from tuition)

**Payment Plan Fee:**

($10 in addition to tuition total, if chosen)

**Total Class Tuition:**

Payment Method (check one):  
Cash ☐  
Check ☐  
Credit/Debit ☐

Name:  
Credit Card Number:

Expiration Date:  
Security Code:

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SCHOOL POLICIES

Low Enrollment/Cancellation: A class may be cancelled if enrollment does not meet its predetermined minimum. Should this be the case, participants will be notified no later than the third week of the session. If the participant is unable to move to another class, the remainder of prepaid tuition will be refunded.

Participant Withdrawal: Tuition refunds will be given when a participant withdraws by the second day of class. A processing fee may be applied to card repayments. If a withdrawal notice is submitted to the School Administrator after that date, the participant will receive tuition credit with the School of Dancing Wheels good for one year from the date of withdrawal.

Weather Related & Emergency Closing: In the event of a weather related or emergency closing, participants whose classes were cancelled will not be refunded, but may take any other class as a make-up class at any point during the remainder of the session (with notice given to the School Administrator).

MONTHLY PAYMENT PLANS: Participants have the option to have tuition spread out into monthly payments with a commitment to the entire session. Monthly payments must be made by the end of the first week for each applicable month. A one-time payment plan fee of $10 will be applied.

MAKE-UP LESSONS: Should you wish to make-up a missed class either before or after an absence, you may attend any other offered class during the week with approval from the School Administrator. Requests must be submitted at least 48 hours before the desired class.

PRIVATE LESSONS: Participants desiring private lessons must contact the School Administrator for scheduling and pricing.

MAXIMUM CONSECUTIVE ABSENCES: If a student is absent from three (3) consecutive classes without prior notice of no less than three (3) hours before class time, the student may be asked to not return to that enrolled class, at the discretion of the School’s administration. Any prepaid tuition for the remainder of the session will be refunded.

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RELEASE OF LIABILITY

I, __________________________________, being aware of my own/my student’s health and physical condition, and having knowledge that my/my student’s participation in any physical activity may be injurious, am acknowledging this release from liability for accidental injury or illness which may be incurred as a result of participating in this physical activity. I hereby assume all risks connected therewith and consent to my/my student’s participation in this program. In the event that medical care or treatment is required, I agree to be financially responsible for any costs incurred as a result. I acknowledge that I have carefully read this Liability Waiver and Release Form and fully understand that it is a release of liability. I agree to give up any right that I may otherwise have to bring a legal action against The Dancing Wheels Company & School and its staff for negligence or any other personal injury or property damage.

_______________________________________________ _________________________________
Signature (Parent/Guardian for Minors)                                 Date

PHOTO RELEASE

I hereby grant permission to The Dancing Wheels Company & School to use photographs and/or video of me taken on this day at this event in publications, news releases, online, and in other communications related to the mission of their organization.

_______________________________________________ _________________________________
Signature (Parent/Guardian for Minors)                                 Date

POLICY AGREEMENT

I understand and accept The Dancing Wheels Company & School’s policies and my billing obligations as stated in the registration form.

_______________________________________________ _________________________________
Signature (Parent/Guardian for Minors)                                 Date

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