

# Arabesque Etc. Dance

35 West Main St.  
Richmond, VT 05477  
802-383-8468

## **REGISTRATION & DANCER INFORMATION 2018/19:**

Dancer's Name: \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Years of Dance Experience \_\_\_\_\_

Age \_\_\_\_\_

Siblings who dance at AED \_\_\_\_\_

Primary Parent/Guardian(s) \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone(s) \_\_\_\_\_

Work Phone(s) \_\_\_\_\_

E-Mail (s) \_\_\_\_\_

Primary Contact for Billing/Update Notices \_\_\_\_\_

### **EMERGENCY INFORMATION: (nonparent please)**

Emergency Contact \_\_\_\_\_

Contact Phone \_\_\_\_\_

Relationship \_\_\_\_\_

**MEDICAL INFORMATION:**

Special Needs/Concerns: \_\_\_\_\_

\_\_\_\_\_

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

Physician \_\_\_\_\_ Phone Number \_\_\_\_\_

**SCHOOL INFORMATION:**

School Dancer Attends

\_\_\_\_\_

Bus Number \_\_\_\_\_ Bus Day(s) \_\_\_\_\_

- My Child has my permission to walk to dance from school: Yes ( ) No ( )
- My Child has permission to go to Sweet Simones Bakery with a group of friends unchaperoned during the first class (only ages 8 and up): Yes ( ) No ( )
- My Child will be needing teenage babysitting at AED during the first class (between the bus pick up and the 2nd class): Yes ( ) No ( )

<b>Class Day</b>	<b>Time</b>	<b>Class Title</b>	<b>Tuition</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Non-Refundable Yearly Registration Fee:**

Circle One:    Single Dancer (\$15)    Family Registration (\$25)

**Non-Refundable June Monthly Fee (1/2 price monthly fee) :** \_\_\_\_\_

**CONSENT AND AGREEMENT:**

**Parent/Guardian please initial below indicating you agree with the following statements:**

I give my consent for Arabesque Etc. Dance LLC to use photographs and videos of me/and or my child that may be used in various forms of publication, without compensation. I give consent to have my child filmed by MMCTV. \_\_\_\_\_

I have received a copy of, read, and agree with the Arabesque Etc. Dance LLC Policy Statement.  
\_\_\_\_\_

I will complete my financial agreements with AED. \_\_\_\_\_

All families are required to give three hours volunteer time or \$75 donation annually.  
\_\_\_\_\_

**Parent/Guardian and Students (over age 10) please initial below indicating you agree with the following statements:**

All Dancers may be expected to participate in tech weeks (the week before the AED performances in Winter and Spring). Regardless of other school and sport obligations, I agree that these weeks will be dedicated to mandatory rehearsals and scheduled class times.  
\_\_\_\_\_

I understand that each dancer is expected to attend classes the month leading up to the show.  
\_\_\_\_\_

I understand that attending class is a prerequisite for participating in shows and continuing onto the next level. \_\_\_\_\_

Unless previously arranged with director, students are expected to complete the entire school year session (September – June). Withdrawing from class before June *requires full payment of the rest of the year's scheduled classes including the cost of a costume* if one has been ordered prior to withdrawal. \_\_\_\_\_

I will contact AED at 383-8468 if student will be missing a class. *This is important as precious time is lost if your child is inadvertently gone missing and we can not call you immediately* . We do our best to contact parents if a child does not get off the bus as intended, but we are also shepherding 12-16 children at that time. \_\_\_\_\_

AED will always keep safety first, however injuries can happen. Please inform your teacher of any prior injuries. Always listen to your body and understand that you take class at your own risk. If a child sustains an injury during class or while at AED, it is the parent/caregiver's responsibility to seek medical care within 24 hours and notify the Director with the results.

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Arabesque Etc. Dance LLC and staff are not liable for any personal injury or loss of property.

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**PARENT/GUARDIAN SIGNATURE**

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DATE \_\_\_\_\_

**DANCER (10 years+) SIGNATURE**

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DATE \_\_\_\_\_

**Please complete form and mail a copy with a check to:  
Arabesque Etc. Dance LLC, 35W Main St., Richmond, VT, 05477  
Arabesqueetc.com --- Arabesqueetcdance@gmail.com --- 802-383-8468**