

Registration Information - Yucca Valley Studio

Student Name _____ Age _____ Birthdate _____

Parent Name _____

Address _____ City _____

State _____ Zip _____ Home Phone _____ Cell Phone _____

Email _____

Please write the number you wish to receive all STARSTRUCK TEXT REMINDERS: _____

Liability Statement

I do not hold StarStruck Dance Studio or it's employees responsible for injuries incurred during my child's training or performing time(s). I do not hold StarStruck Dance Studio responsible for lost or stolen articles. I give StarStruck Dance Studio permission to have my child treated in the event of my absence if there is an emergency.

Signature of parent/guardian _____ Date _____

Spring Session 2021 Summer Session 2021 Fall Session 2021

Classes Enrolled:	Time:	Day:	Cost:

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*Office use only. Do not write in this area.

★ Spring Session

Jan. Tuition _____

Feb. Tuition _____

T-Shirt \$20 _____

March Tuition _____

April Tuition _____

May Tuition _____

June Tuition _____

★ Summer Session

June/July Tuition _____

July /Aug. Tuition _____

★ Fall Session

Sept. Tuition _____

Oct. Tuition _____

Nov. Tuition _____

Dec. Tuition _____

Notes: _____

Monthly Tuition:

Spring: _____

Summer: _____

Fall: _____

Registration Fee \$30 _____

Date paid: _____

Total paid \$ _____

★ Costume Total \$ _____

Winter Outfit \$ _____ (\$75) check cash credit

Studio Policy: PLEASE READ CAREFULLY

You will receive a copy of our studio booklet and policies when you register. Please read our policies carefully so we can continue to offer you the best possible dance experience. You will initial by each policy and we will keep it on file.

***Recital:** Recital participants must dance in **all** scheduled show performances for professional video-taping purposes and to protect show authenticity. All spectators must purchase a ticket. No video-taping or flash photography allowed.

DANCER EXPERIENCE: Years dance experience: _____ Former Dance Studios attended: _____

Are you interested in competitive dance team? YES NO *Auditions in September!

Please tell us any special information so that we may fulfill/meet/address your dancers needs/expectations: _____

I have read and agree to abide by StarStruck policies. I understand the consequence for not abiding by the policies can infringe on my right to participate at StarStruck Dance Studio.

Dancer: _____ Date: _____
Parent: _____ Date: _____

How did you hear about us?

- Radio Newspaper Internet Friend Yellow Pages Sign Drive By Postcard

Did someone refer you to our studio? Please tell us.

Referred by: _____

*EARN 1 FREE RECITAL TICKET WITH A REFERRAL!
VIP TICKETS EARNED WITH EACH REFERRAL AFTER!
VIP TICKETS WITH EACH REFERRAL



StarStruck
Dance Studio