



**2011 - 2012
Registration Form**

Date: _____

STUDENT

Name: _____ Date of Birth: _____ Age: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
School Name: _____
Cell Phone: _____

Guardian

Name: _____ E-Mail: _____
Cell Phone: _____ Work Phone: _____

How did you hear about Starrz Performing Arts Centre?

Emergency Contact:

Name: _____
Phone Number: _____
Relation to Student: _____

Fall Class Schedule: _____

Monthly Tuition _____ **Discount (if applicable)** _____

FOR OFFICE USE ONLY

Payment method _____ **check no.** _____

Date _____

Staff Member _____



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Tuition Billing Explanation Agreement**

Tuition fees for all classes are due in advance no later than the 1st day of the month. If the 1st falls on a weekend the payment is due no later than the next business day. We observe all major holidays noted on the Pell City School System calendar; we DO NOT pro-rate tuition on months that contain holidays, nor do we pro-rate tuition for classes in which a student does not attend. By signing this document, you agree to the tuition as indicated below for the entire season or until STARRZ Performing Arts Centre receives in writing (prior to the 1st day of the month) that you have chosen to drop enrollment from these classes.

Any tuition payment that is 30 days past due or more will result in the removal of the student from classes until their account has a \$0 balance. Repeated past due accounts may result in the student being permanently removed from all classes with possible legal action to be taken.

An Annual Registration fee shall be assessed with EACH student to cover administrative costs, one pair of tights, and a STARRZ T-Shirt. STARRZ Performing Arts Centre offers at the time of Registration, for an additional \$50, to include the dance shoes necessary for Recital and Competition Teams. Shoe order must be included in this registration to qualify for the discounted price.

(a) Production numbers practice will replace regular competition practices and will be from 4:00pm – 7:00pm on Tuesdays. A notice will be given when this starts.

(b) To remain eligible for competition teams, students must also enroll and participate in a minimum of three additional classes as indicated below. One of the extra classes must be a ballet class. Additional classes are available at the discounted rate of \$25 per month per class.

- 1) Star Struck Competition Line – Required to take at least three (3) recreational classes.
- 2) Star Power Competition Line – Required to take at least three (3) recreational classes.
- 3) Mega Star Competition Line – Required to take at least three (3) recreational classes.

Registration Fee	\$	150.
Registration Fee including shoes	\$	175.
Recital Fee	\$	50.
Recital Costumes (See costume chart)	\$	200.-275.
Tuition Late Fee	\$	25.
Returned Check Fee	\$	35.
Additional Recreational Classes (per month)	\$	25.

Student's Name: _____

Tights Size: _____ Shoe Size: Ballet: _____ Tap: _____ Jazz _____ T-Shirt Size: _____

Parent/Guardian Name

Parent/Guardian Signature

E-Mail (for invoicing and notifications)



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**WARNING, AGREEMENT TO OBEY INSTRUCTIONS,
RELEASE, ASSUMPTION OF RISK, AND
AGREEMENT TO HOLD HARMLESS**

(Both the applicant student and a parent or guardian must read carefully and sign.)

Student & Parent/Legal Guardian

I am aware that practicing/participating in any dance class can be a dangerous activity involving MANY RISKS OF INJURY. I understand that the dangers and risk of practicing/participating in all of our activities include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system, and serious injury or impairment to other aspects of my body/general health and wellbeing. I understand that the dangers and risks of practicing/participating in any of our activities may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities, and the general enjoyment of life. It is because of the dangers of practicing/participating on any of our activities, I recognize the importance of following coaches/instructors regarding techniques, training and other team rules, etc., and agree to obey such instructions. In consideration of STARRZ Performing Arts Centre permitting me to engage in all activities related to the practicing/participating, including, but not limited to, auditioning, practicing or participating, I hereby assume all risks associated with participation and agree to hold STARRZ Performing Arts Centre, its employees, agents, representatives, coaches/instructors, and volunteers harmless from any and all liability, actions, causes of action, debts, claims, or demands of any kind and form of nature whatsoever which may arise by or in connection with my participation in any activities related to all of our classes/teams. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

DATE: _____, 20__

(Student's Signature)

(Signature of Parent or Guardian)



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For and in consideration of my engagement as a model by STARRZ Performing Arts Centre, hereafter referred to as the photographer, on terms or fee hereinafter stated, I hereby give the photographer, her/his legal representatives and assigns, those for whom the photographer is acting, and those acting with her/his permission, or her/his employees, the right and permission to copyright and/or use, reuse and/or publish, and republish photographic pictures and portraits of me, or in which I may be distorted in character, or form, in conjunction with my own or a fictitious name, on reproductions thereof in color, or black and white made through any media by the photographer at her/his studio or on reproductions thereof in color, or black and white made through any media by the photographer at her/his studio or elsewhere, for any purpose whatsoever, including the use of any printed matter in conjunction therewith.

I hereby waive any right to inspect or approve the finished photograph or advertising copy or printed matter that may be used in conjunction therewith or to the eventual use that it might be applied.

I hereby release, discharge and agree to save harm from the photographer, her/his representatives, assigns, employees or any person or persons, corporation or corporations, acting under her/his permission or authority, or any person, persons, corporation or corporations, for whom she/he might be acting, including any firm publishing and/or distributing the finished product, in whole or in part, form and against any liability as a result of any distortion, blurring, or alteration, optical illusion, or use in composite form, either intentionally or otherwise, that may occur or be produced in the taking, processing or reproduction of the finished product, its publication or distribution of the same, even should the same subject me to ridicule, scandal, reproach, scorn or indignity.

I hereby warrant that I am under/over twenty one years of age, and competent to contract in my own name in so far as the above concerned.

I have read the forgoing release, authorization and agreement, before affixing my signature below, and warrant that I fully understand the contents thereof.

_____	_____	_____
Model Name	Model Signature	

		Model Address
_____	_____	_____
Witness Name	Witness Signature	

		Witness Address

I hereby certify that I am the parent and/or guardian of, _____, a minor under the age of twenty-one years old, and in consideration of value received, the receipt of which is hereby acknowledged. I hereby consent that any photographs which have been, or are about to be taken by the photographer, may be used by her/him for the purposes set forth in original release hereinabove, signed by the minor model, with the same force and effect as if executed by me as the parent and/or guardian.

_____	_____
Parent/Guardian Name	
_____	_____
Parent/Guardian Signature	Parent/Guardian Address