



# American Stars of Dance, Inc. Dance Registration Form 2018 - 2019

Received \_\_\_\_\_

237 Depot Street P.O. Box 518  
Antioch, IL 60002

133 Cedar Ave.  
Lake Villa, IL 60046

Office (847) 838-1234 Fax (847) 838-0699 email: office@americanstarsofdance.com website: www.americanstarsofdance.com

### PARENT INFORMATION

Parent/Guardian Name: *Cortney Churchill*

Cell Phone No.: (312) 618-7679

Parent or Guardian #2: *Phil Churchill*

Cell Phone No.: (847) 436-3301

Address: *37370 N Capillo Ave*

Home Phone: (847) 265-3362

City/St/Zip: *Lake Villa, IL 60046*

Email: *cortney.churchill@gmail.com*

**Most communication will be emailed**

Emergency Name: *Judy Foszcz*

Emergency Phone No.: (847) 546-3463

**(Other than Parent)**

### STUDENT INFORMATION

Name: *Jordan Churchill*

Sex: *F*

Birthday: *6/28/2006*

Age: *11*

Health Restrictions / Allergies: *Penicillin*

**Class Requested**    **Studio Requested**  
(not guaranteed)

- Combination
- Jazz/Ballet                      Antioch    Lake Villa
- Adult
- Ballet
- Hip Hop
- Poms
- Boogie Kidz (45 Minutes)

### **Availability**

- Morning (9 - 12pm)
- Late Afternoon (3 - 5pm)
- Saturday
- Early Afternoon (12 - 3pm)
- Evening (after 5pm)

Please list times you **CANNOT** attend:

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

\*\*\*\* This is only your preference. **Class placement is dependent upon instructor approval.** If there is not a class that fits your schedule, please let us know. We may be able to open a new class.

Monthly Class Fee

|                |         |
|----------------|---------|
| 1 Hour Class   | \$55.00 |
| 1 ½ Hour Class | \$77.00 |

**5% Discount** for 2 classes  
or Tuition paid in full for 1 class

**15% Discount** for 3 classes  
or Tuition paid in full for 2 classes

**25% Discount** for 4 or more classes  
or Tuition paid in full for 3 classes or more

## DUE AT REGISTRATION

|   |                |
|---|----------------|
| Registration Fee (per family)   | <u>\$25.00</u> |
| 1st Month's tuition   | _____          |
| June's Tuition  | _____          |
| Please contact the office if not registering in person for correct amounts. |                |
| <b>TOTAL DUE</b>  | _____          |

### TUITION is due on the 1st of every month

**A late fee of \$15.00 will be applied to account on the 15th of the month on past due accounts.**

*If you drop a class for any reason, you agree to notify the office immediately, **forfeit June's pre-paid tuition, current month's tuition, \$25 registration fee, and pay any balance due.***

Paid with: Cash \_\_\_\_\_ Check # \_\_\_\_\_ Charge \_\_\_\_\_

Please see the office if you wish to have American Stars of Dance automatically charge your credit/debit card every month.

*There is a \$25 return check fee for any returned check.*

**HOLD HARMLESS AGREEMENT:** I hereby give my permission for my daughter/son to participate in the program(s) at American Stars of Dance, Inc. I hereby accept all risks and the responsibilities for the use of premise, area, and/or facility including the use of equipment. I further agree to indemnify and save harmless may arise out of the use of thereof. I further give permission for my daughter/son to be photographed and/or videotaped during all classes, rehearsals, and performances. I understand any of which may be used for purposes of promoting American Stars of Dance, Inc. through newspaper ads/articles, brochures/flyers, and the studio's website without releasing the participant's name. I have read and understood the terms of the above agreement.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_