

# Kids 'N Dance After School Registration

## General Registration Information

Child's Name: \_\_\_\_\_  
First Last

Age: \_\_\_\_\_ Birthday: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_  
Teacher: \_\_\_\_\_

Session Starting (circle one):    Sept.    Dec.    March

## Payment Information

<p><b>Days Attending</b>          Wednesday counts as 2 days</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Mon. 3:00 - 5:45</td> <td style="width: 15%;">Tues. 3:00 - 5:45</td> <td style="width: 15%;">Wed. 1:30 - 5:45</td> <td style="width: 15%;">Th. 3:00 - 5:45</td> <td style="width: 15%;">Fri 3:00 - 5:45</td> </tr> </table> <p>Number of days for rate calculation: _____</p>	Mon. 3:00 - 5:45	Tues. 3:00 - 5:45	Wed. 1:30 - 5:45	Th. 3:00 - 5:45	Fri 3:00 - 5:45	<p><b>Rate Chart</b>          Wednesday counts as 2 days</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>1 day/week</td><td>\$33/day</td></tr> <tr><td>2 days/week</td><td>\$31/day</td></tr> <tr><td>3 days/week</td><td>\$28/day</td></tr> <tr><td>4 days/week</td><td>\$25/day</td></tr> <tr><td>5 days/week</td><td>\$22/day</td></tr> </table>	1 day/week	\$33/day	2 days/week	\$31/day	3 days/week	\$28/day	4 days/week	\$25/day	5 days/week	\$22/day	<p><b>Fee Calculation</b></p> <p>Daily rate to be applied: _____  <small>(use rate chart)</small></p> <p>Number of days Attending/month X _____</p> <p><b>AVERAGE MONTHLY COST</b> _____</p>
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## Deposit

One month's registration is held. It will be applied to cover the cost of the last month of you last session providing 30 days notice has been given. Without notice, deposit is not refundable. Notice is not required for the last session of the school year.

## Pick Up Time:

What are your predicted pick up times?

Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thurs: \_\_\_\_\_ Fri: \_\_\_\_\_

## Parent Information

<b>Parent 1: (primary contact)</b>			<b>Parent 2:</b>		
_____			_____		
First Name	Last Name		First Name	Last Name	
_____			_____		
Address	City	Zip	Address	City	Zip
_____			_____		
Home Phone	_____	Cell	_____	Home Phone	_____
_____			_____		
Work Phone	_____	Email	_____	Work Phone	_____
_____			_____		

## Emergency Information

<b>Emergency Contacts: (if you can't be reached)</b> 1) _____ First Name _____ Last _____ Home Phone _____ Cell _____ Work Phone _____ relationship: _____ 1) _____ First Name _____ Last _____ Home Phone _____ Cell _____ Work Phone _____ relationship: _____	<b>Medical Contacts:</b> 1) _____ DOCTOR'S Name Phone: _____ Insurance #: _____ 2) _____ DENTIST Name Phone: _____ Insurance #: _____ <b>Preferred Hospital:</b> _____
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## Help us get to know your child

1. Are there any allergies or health concerns we should be aware of?
2. Will you provide a booster seat for the van?
3. What types of snacks/drinks do you/your child prefer we serve?
4. What activities are most enjoyed?
5. Are there any social/emotional needs we should be aware of?
6. What methods are used at home to encourage positive and cooperative behavior?
7. What is your child's attitude toward homework? How much support is needed for homework?
8. What academic areas interest or are easy for your child? Which academic areas are challenging?

## Important Policies

### Due Dates:

- Payment is due by the 3<sup>rd</sup> day of each month, after which a \$10 penalty per day will be applied for 4 days.
- Failure to pay by the seventh day of the month will result in dismissal from the program with no deposit refund.

### Pick Up Time:

- The pick up time is 5:45. \$1 per minute will be charged for late pick-ups after 6:00.
- Please notify us if you are aware of changing a pick-up time as we will sometimes be at a park. Location of park will be posted if you arrive and we are not on site.

### Sign Out:

- Sign out your child daily.
- If a parent is not picking up, staff must be notified in advanced and person must provide ID and sign in your place.

### Absences:

- Please call the studio or director's cell prior to pick up time to inform of an absence. It causes confusion and transportation delays.
- Failure to contact us will result in a \$10 fee.

### Statement of Understanding:

I have read and understand all the policies listed and agree to all of the terms. I give my permission for Kids 'N Dance to transport my child from school to their site and to local parks.

Signature:

Printed Name:

Date:

