



SUTO DANCE STUDIO

6116 Roseland Drive
Rockville, MD 20852
301-871-1000



www.Sutodance.com

PARENT / STUDENT REGISTRATION AND ENROLLMENT AGREEMENT

PLEASE READ CAREFULLY THE INFORMATION LISTED BELOW, INITIAL ON THE LINE AFTER EACH POLICY AND SIGN AND DATE AT THE BOTTOM. THANK YOU

Please Print Clearly

Student's Name (first, last)			Age			Date of Birth		
Parent's or Guardian's Name, if Student is Under 18 Years (please print)								
Street Address						(Apt. #)		
City			State			Zip Code		
() <small>area code</small> Home Phone			() <small>area code</small> Work Phone			() <small>area code</small> Cell Phone		
Dance Class			Day of Week			Time of Class		
Email Address (print legibly)								
Credit Card Number (Sorry no American express)						Exp. Date		3 digit security code

All students must be in good health, to withstand a dance class and exercise program. If any health problems exist, Suto Dance Studio must be informed prior to any class taken. _____

CLASS AND PERFORMANCE POLICY: All dance classes are continuous from September to June. A total of 36 weeks of classes is offered for the school year, ending with our annual dance performance. All students will be committed to the entire year with the understanding that they will participate in the performance. _____

PAYMENT INFORMATION: The Registration, Tuition, Rehearsals and Performance fees are combined and will be divided into either three equal, or nine monthly payments for the 36 week program. Includes Performance Package. (Senior Tap, Monday adults exempt) (Monthly Payment will be applied to your credit card, automatically on the second week of each month) _____

REFUND POLICY: We are sorry, but there will be NO REFUNDS for Registration, Tuition and Performance Fees, once classes are in session. Lost recital tickets cannot be replaced or refunded. _____

LATE FEE POLICY: A \$10 late fee will be charged for any payment received after any due date. _____

INCLEMENT WEATHER POLICY: When the classes of Montgomery County Public Schools are cancelled due to inclement weather, the SUTO DANCE STUDIO classes are also cancelled. There will be no make-up classes for inclement weather. _____

ATTENDANCE POLICY: It is requested that all students give prior notice (24 hrs.) if a student is to miss class. Please call the studio at (301) 871-1000. Attendance is most important and missed classes due to extra curricular activities is greatly discouraged. _____

ILLNESS / INJURY POLICY: If a student misses a class due to illness, or injury, it is the student's responsibility to make up that class. SUTO DANCE STUDIO cannot be held liable for any injuries sustained during classes, rehearsals, and dance performances. Every precaution will be taken to see that all instruction is safe. All students take class at their own risk. _____

I certify that the registration information is correct and I have read and understand the above policies. I agree to pay the fees in either 3 equal (September, December, March) or nine monthly payments, for the 36 weeks of classes prior to taking any dance classes. I also acknowledge participation in the annual June performance and that attendance of extra rehearsals are mandatory. I am responsible for the payment of any late fees or other fees associated with participating in any studio event other than classes. _____

Parent / Guardian/ Student _____ Date _____

Please print name _____