



145 Main St, Unit E Pennsburg, PA 18073
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 julikelldance@gmail.com 267-923-5223

Student Registration Form 2024-2025

Student's Name (First & Last): _____ DOB (if under 18): _____ Age _____
 Student's Name (First & Last): _____ DOB (if under 18): _____ Age _____
 Student's Name (First & Last): _____ DOB (if under 18): _____ Age _____
 Mailing Address: _____
 City/Town: _____ State: _____ Zip _____ Home phone #: _____
 Mother's Name: _____ Mother Cell #: _____
 Father's Name: _____ Father Cell #: _____
 Name of Responsible Party: _____
 School Student Attends _____ How did you hear about us? _____
 Please advise us of any medical conditions that may affect the student's participation _____
 Student has Insurance: yes or no _____
 Billing E-Mail _____ E-Mail _____
 Years Attended JKDC _____ Name on Facebook _____

Agreement for Participation

I understand that dance classes may include, without limitation, dancing with props, stretching, barre work, across the floor combinations, dance routines in the center, and other related activities. I further understand that all of the activities of the dance class involve some degree of risk of strain or bodily injury. Juli Kell's Dance Center, LLC is not responsible for injury, loss of personal property, or illness/disease. I agree to be responsible for reading studio correspondence (which includes joining any necessary group apps) and respecting deadlines, if applicable. I understand the policy & procedures in the student handbook set forth by Juli Kell's Dance Center for the 2024-2025 Season. I agree to pay monthly tuition based on a ten-month cycle, September through & including June 2025. I agree to make costume deposits by Oct 1, 2024 & have my balance current & costume balance paid off by December 9, 2024. I understand that tuition is due on the 1st of every month and I will be charged a \$15 late fee if not paid by the 15th of the month. I understand that costume orders or recital ticket orders will not be released until the account is current. It is understood that all tuition is non-refundable and if the status of the account is not kept current (within 30 days), late fees will be applied and all class or performance participation will be revoked until the account is up to date. I understand that any images captured during class time and performances may be used to promote Juli Kell's Dance Center. Should there be a spike in illness such as Covid-19 cases, and we are forced into a Shelter in Place situation again, all classes will continue virtually. Tuition will remain the same for any amount of time spent doing virtual classes. We will resume regular classes as soon as shelter in place is lifted.

I hereby acknowledge that I have read the statements above and agree to participate accordingly.

Date: _____ Signature: _____

Please list the class(es) you wish to enroll in.

Style & Level	Day/Time	Class Length
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Total Class Length _____ **SUB-TOTAL:** \$ _____
 8. _____ 8% Pay full Year Discount (Cash or Check): \$ (_____)
 9. _____ **SUB-TOTAL:** \$ _____
 10. _____ **Family Registration Fee:** \$ **35.00**
 Private _____ **TOTAL:** \$ _____
 Private _____ **Amount Paid (Min. \$35.00):** \$ _____
Balance Due: \$ _____

FOR OFFICE USE ONLY:

REGISTRATION DATE: _____ RECITAL VOLUNTEER _____