

TC Dance Academy for the Performing Arts 2026/2027 Registration Form
810 Commerce Drive Kendallville, IN 46755

Please read and fill out this form completely. Please print.

Today's Date: _____

Students Last Name: _____ First Name _____

Date of Birth: ____/____/____ Age: _____ Sex: ____ F ____ M

Number of Years of Dance Experience: _____ Styles of Dance Studied: _____

Student Email: _____ Student Cell Phone: _____

School attending and Grade in the fall: _____

What classes will you be enrolling in?

Two Tu (Ages 2-3) ____ Pre-School Combo (Ages 3-4) ____ Pre-School Tumbling (Ages 3-4) ____ Tap/Ballet Combo (Ages 5-6) ____

Tap/Hip Hop Combo (Ages 6-8) ____ JTB (Ages 6-8) ____ Tumbling (Ages 5 & Up) ____

Tap (Ages 6 & Up) ____ Jazz (Ages 6 & Up) ____ Hip Hop (Ages 6 & Up) ____ Ballet (Ages 6 & Up) ____

At what time of day can you begin classes? Mon _____ Tues _____ Wed _____ Thurs _____

Is there any day you can't dance? _____

Please list all siblings of this student who also dance/tumbles at TC Dance: _____

Parent/Guardian 1 Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) ____ - ____ Cell Phone: (____) ____ - ____

Work Phone: (____) ____ - ____ Ext _____

Email : _____

TC Dance uses email as our main form of communication. We will send newsletters and any information we feel is important for our clients. You understand that if you have not received an email from TC Dance within 30 days of registration, it is your responsibility to follow up with TC Dance. If you wish to have written communication, you can pick up a hard copy at the front desk.

Parent/Guardian 2 Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) ____ - ____ Cell Phone: (____) ____ - ____

Work Phone: (____) ____ - ____ Ext _____

Email: _____

Emergency Contact 1 _____

Emergency Contact 2 _____

Please list any medical conditions or learning problems we should be aware of: _____

Family Doctor: _____ Phone: _____

1. A \$10 per class registration fee must be submitted with this form (maximum of \$30). This fee will be refunded if no class is offered during the current dance year. Fee will not be refunded if a class is offered and your child does not participate.
2. The monthly tuition is due on the first of each month. Tuition paid on the 11th day or later will be charged a \$15 late fee. An additional late fee of 20% of the unpaid balances will be added to balances over 60 days past due. Any fees 60 days past due will result in the dancer not being admitted to classes. Any competing dancer with outstanding tuition will not be allowed to compete. Payments can be made at the front desk during studio hours, or you can access your parent portal and pay 24/7. We can automatically debit your checking or savings if you choose (you will need to set it up through your parent portal or stop at the front desk).
Tuition is non-refundable. There will be a \$25.00 service charge if the bank returns a check or the funds on automatic withdrawal are not available.
Monthly tuition remains the same regardless of the number of weeks per month or absences. TC Dance will not hold "make-up" classes if a student is absent from his/her scheduled session or if a class is delayed or cancelled due to inclement weather. **Tuition will not be adjusted for cancellations due to weather.**

I understand the above information concerning tuition. Initial Here _____

3. TC Dance requires a two week notice prior to dropping any classes. If notice is not given, you will continue to be charged tuition.
4. Costume fees are due in November and are non-refundable. Statements will be sent in October via email. Costume fees can be paid through your parent portal. Costumes will not be ordered if not paid in full by November 15. Late costume payments will incur a \$35 per costume late fee.
5. All students perform in the year end recital. Tickets need to be purchased for recital. Tickets cannot be purchased through your parent portal. Any dancer with unpaid balances will not be allowed to participate in recital.
6. The studio is not responsible for providing before or after class care for students. Parents with students under the age of 5 must remain at the studio during classes. Food and drink are only allowed in designated areas. Parents are expected to pick up their child at the end of class time. Any dancer that has not been picked up by the time the studio closes for the day will have \$25 charged to their account.

7. **Waiver**

I understand that a physician should approve any form of exercise. It is agreed that I waive and release all rights and claims for damages that I and/or my child might have against Tri-County Dance Academy, Inc.; TC Dance; Maude Jo Yerrick, Ryan Yerrick; any of the Tri-County Dance Academy, Inc. instructors, Staff or any Tri-County Dance Academy, Inc. representative(s); for any injury in connection with the Tri-County Dance Academy, Inc. dance programs and other activities relating to such programs including but not restricted to competitions, performances, field trips and recitals. The risk of such programs is fully understood. I understand I am responsible to maintain insurance or pay for medical expenses incurred. In case of emergency, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the licensed health-care practitioner selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections or medications for my child.

8. **Consent for Use of Photography**

I grant to TC Dance, Tri County Dance Academy and its representatives, assignees and employees the right to use photographs of me and my property in connection with TC Dance. I authorize the above companies for its assignees and transferees to copyright, use and publish the same in print and/or electronically. I agree that the above companies may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I understand the above information concerning the use of photography. Initial Here _____

I have read and understand the above policies and procedures and agree to abide by them. I am the responsible party for all expenses incurred by the registrant.

Today's Date: _____

Parent or Guardian _____