

Registration and Contract  
A \$20 Registration Fee is required to  
hold your spot



302 Paulette St.  
Houma LA 70364  
985-226-0827

**Dancer's Information**

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_  
Age \_\_\_\_\_ (as of September 1<sup>st</sup>) Birthdate \_\_\_\_\_ Female  Male   
Street \_\_\_\_\_ Apt# \_\_\_\_\_  
City \_\_\_\_\_ Zip Code \_\_\_\_\_

**Parent/Guardian Information**

Mother's Name \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Father's Name \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Emergency Contact  
Name \_\_\_\_\_ Phone \_\_\_\_\_

**Previous Dance Training**

Studio \_\_\_\_\_ Teacher \_\_\_\_\_ Years completed \_\_\_\_\_  
Studio \_\_\_\_\_ Teacher \_\_\_\_\_ Years completed \_\_\_\_\_

**Please list the classes (w/ day & time) that you are interested in attending.**

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

**Please complete the back of this application too!**

Denise's Dance Studio Student (DDS) - Parent Agreement

Please initial to the left of each section

Parent Name \_\_\_\_\_

Family Email \_\_\_\_\_

**TUITION**

Tuition is \$50 a month for 1 class a week, \$70 a month for 2 classes or to add a sibling & \$85 a month for 3 classes or 3 siblings. Once you are paying \$85 a month you may take as many classes as you like. Tuition is due at the beginning of each month. You will receive a Payment envelope that will go home at the end of each month. Send the envelope back with your payment. Please keep track of your Envelope! It is your record of payments during this Recital year. There will be a \$25 fee for any NSF checks. The monthly tuition does not change if the student is absent or if there are various weeks in the month. There will be 9 tuition payments this year. If paying for the full year a 10% discount applies.

**ATTENDANCE**

This is a RECITAL YEAR! Regular Attendance is Expected! Students are expected to arrive On Time. Inconsistent attendance can possibly remove their opportunity to perform in Recital 2024. If a student must miss class, Please notify me by Text. Students must be picked up promptly after class.

**HAIR/DRESS CODE**

Hair should be worn neatly off the face & fastened securely. Younger students (Tues 5:15 & 6:15), pink or black leotard & tights, pink ballet shoes & black tap shoes. All other Tap/Jazz combo classes wear black jazz pants & fitted black top with tan tap shoe & tan jazz shoes. Fitted bike shorts may be worn with tights only. Absolutely NO SHORTS or STREET CLOTHES ALLOWED! Studio T-Shirts are allowed. Hip-Hop class wear tennis shoes, jazz pants & fitted black shirt or studio T-Shirt. Tumbling class wear jazz pants or bike short, no tights or shoes. PLEASE WRITE YOUR CHILDS NAME ON ALL DANCE SHOES.

**ETIQUETTE**

NO Gum! No outside Food or Drinks Allowed! You may bring Water. NO CELL PHONE USE IN THE STUDIO! If you feel it is necessary for your child to bring a cell phone it must be in their bag the Entire time they are in the studio. Please don't send your child with a toy, it is distracting to Everyone.

**PARENT OBSERVATION**

It is Very distracting to our littles to have parents in the waiting room. No one will be allowed to stay during class. We have Plenty of teachers & assistants to take care of your tiny dancers every need. We will have a few Show-Off days where parents will be invited to come watch a class as we work towards our Recital.

**WEATHER CANCELLATIONS**

We normally follow the Terrebonne Parish School systems lead on class cancellations due to weather issues. You will be contacted by text or email if we have to cancel class.

**LIABILITY**

Students & Parents hereby release & hold harmless the teachers & staff of Denise's Dance Studio, Inc. from any & all liability resulting from any injury or damage sustained by students and/or parents. DDS is not responsible for any lost or stolen items.

**PHOTO RELEASE**

DDS has my permission to use my child's photo image on its website, advertising or other business appropriate means. Photos taken by DDS are the property of DDS.

(Optional) Are there any learning disabilities or medical conditions (including allergies), that DDS staff should be aware of that would help us teach your dancer better? \_\_\_\_\_

I am the parent or legal guardian (or 18 years or older) of \_\_\_\_\_ and have read, understood & accept the policies & procedures (listed above) of Denise's Dance Studio.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_