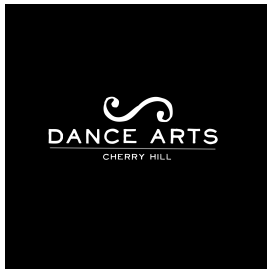


## 2016 - 2017 REGISTRATION KIT



Tuition, Fees, Refund Policy

Dress Codes & Dancewear

2016-17 School Calendar

Registration Forms

**Fall Session Starts:  
Monday September 12th, 2016**

# TUITION, FEES, REFUND POLICY

## CLASS TUITION PER QUARTER\*. Discount may apply\*\*

Class	1 per wk	2 per wk	3 per wk	4 per wk	5 per wk	6 per wk	Unlimited
30-45 Min	\$145	\$265					Take an unlimited number of classes per week. \$915 per quarter.
60 Min	\$160	\$290	\$430				
75 Min	\$185	\$340					
90 Min	\$205	\$370	\$525	\$660	\$755	\$845	
120 Min	\$270	\$500					

**\*4 Quarterly payments per Year.**

## 2016-17 PAYMENT DUE DATES

Quarter	Charges	Due Date
September 12th - November 13th	Tuition	August 15th 2016
November 14th - January 22nd	Tuition & Costume Fee	November 7th 2016
January 23rd - March 19th	Tuition	January 16th 2016
March 20th - May 26th	Tuition & Recital Fee	March 13th 2016

**\*\*\$10 Off Tuition if paid by due date.**

### **COSTUME FEE:**

**\$85.00 per class.** All accounts will be charged a costume fee based on enrolled classes. You may opt-out on a per class basis by notifying the office before December 1st, 2016.

### **RECITAL FEE:**

**\$70.00 / \$30.00 each additional sibling.** Receive 4 Recital Tickets, 2 Tickets each additional sibling. Additional tickets may be purchased for \$20.00 each.

### **REGISTRATION FEE:**

\$25 for new students. \$15 for students returning from the previous year.

### **RETURNED CHECK FEE:**

There is a \$35.00 charge on returned checks.

### **REFUND POLICY:**

**ALL TUITION & FEES ARE NON-REFUNDABLE.** NO REFUNDS OR CREDIT GIVEN FOR ANY REASON INCLUDING BUT NOT LIMITED TO STUDENT ABSENCE AND WEATHER RELATED CLOSINGS. ALL PAYMENTS ARE NON-TRANSFERABLE. STUDENTS ARE WELCOME TO TAKE ANY CLASS IN THEIR AGE GROUP AS A MAKE-UP CLASS.

# DRESS CODES & DANCEWEAR

## DRESS CODES

### **Tiny Tots – Pre Ballet – Tap/Ballet/Acro Combo:**

Pink leotard, pink tights, and pink ballet slippers. Hair must be in a neat bun.  
Black tap shoes for combo class.

### **Beginner Ballet thru Advanced:**

Black leotard, pink tights, and pink ballet slippers.  
Hair must be worn in a neat bun.

### **Jazz – Tap – Hip Hop – Lyrical - Jazz/Tap Combo:**

Black leotard, black tights or jazz pants, and black jazz shoes, clean sneakers (hip hop) or tap shoes. Lyrical wears half-sole's. Hair must be in a ponytail.

### **Boys and Men:**

White tee shirt, black tights, shorts or pants, and black shoes.

## PURCHASING DANCE WEAR

Dance clothes and shoes for small children (ages 3-4) can usually be found at popular department stores such as Target and Pay Less Shoes.

For all students we also recommend:

### **My Dance Bag**

Located at 900 Township Lane (across from the Erlton Fire Dept.)  
Ph: 856.428.8844.

### **Attitudes**

Located at 444B West Route 70, Marlton, NJ 08053 - Ph: (856) 985-7270

## PURCHASING POINTE SHOES

For proper fit and sizing of Pointe shoes we recommend Attitudes (see above) and The Rosin Box in Philadelphia. Rosin Box is located at:  
2050 Sansom Street, Philadelphia PA. - Ph: 215.569.9134

## Fall Session Starts Monday September 12th, 2016

### SCHOOL CLOSINGS\*

**Rosh Hashanah** - Monday, October 3rd, 2016

**Yom Kippur** - Tuesday, October 11th, - Wednesday, October 12th, 2016

**Halloween** - Monday, October 31st, 2016

**Thanksgiving** - Wednesday, November 23rd, - Sunday, November 27th, 2016

**Winter Break** - Monday, December 19th, 2016 - Sunday, January 1st, 2017

**Spring Break** - Monday, April 10th, - Monday, April 17th, 2017

**Memorial Day** - Saturday, May 27th, - Monday, May 29th, 2017

\* SUBJECT TO CHANGE.

### ANNUAL RECITAL PERFORMANCES

**Mandatory Dress Rehearsal:** Tuesday, May 30th, 2017

**Recital Performances:** Wednesday, May 31st & Thursday, June 1st, 2017

### REGISTRATION

#### It's Never Too Late To Register:

**BY MAIL:** Mail Registration Forms to: Dance Arts Cherry Hill  
1149 Marlkrass Rd Cherry Hill NJ 08003

**BY PHONE:** Give us a call at 856-874-0280

**Due at time of Registration:** Quarterly tuition under \$200.00 must be paid in full upon registration. Quarterly tuition over \$200.00 requires at minimum a 50% deposit + registration fee upon registration. Balance will be due the first week of classes. Registration forms must be completely filled out including medical release information and current email address. CASH, CHECK, OR CREDIT CARDS ACCEPTED.

Date Of Registration \_\_\_\_/\_\_\_\_/\_\_\_\_

Student Name \_\_\_\_\_ Age \_\_\_\_\_ Date Of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mothers Name \_\_\_\_\_ Fathers Name \_\_\_\_\_

Phone: H (\_\_\_\_) \_\_\_\_\_ Emergency/Cell (\_\_\_\_) \_\_\_\_\_

**MANDATORY EMAIL ADDRESS FOR BILLING AND ALERTS: (Please Print)** \_\_\_\_\_

Class Name	Day	Time	Length in Minutes

### Session Tuition

Length of class	1 Per Wk	2 Per Wk	3 Per Wk	4 Per Wk	5 Per Wk	6 Per Wk	Qty.	Cost
30-45 Min	\$145	\$265					___ Per Wk	
60 Min	\$160	\$290	\$430				___ Per Wk	
75 Min	\$185	\$340					___ Per Wk	
90 Min	\$205	\$370	\$525	\$660	\$755	\$845	___ Per Wk	
120 Min	\$265	\$500					___ Per Wk	

--- Or ---

Take unlimited classes per week: \$915 Per Quarter.  Unlimited.

**Total Tuition Per Quarter** →

### Discounts & Registration Fee

**\$10 off 1st Quarter.** TUITION MUST BE PAID IN FULL BY AUGUST 15TH 2017. → -

\$10 off per Quarter for each additional family member. NO DISCOUNT FOR FIRST STUDENT. → -

Total Yearly Tuition Paid In Full - Deduct %5. → -

**Registration Fee:**  \$25 (New Student)  \$15 (Returning 2015-16 Student) →

**Total**

<p style="color: red; font-size: small; margin: 0;">NO REFUNDS OR CREDIT GIVEN FOR ANY REASON INCLUDING STUDENT ABSENCE AND WEATHER RELATED CLOSINGS. ALL TUITION AND FEES ARE NON-REFUNDABLE. ALL PAYMENTS NON-TRANSFERABLE. STUDENTS ARE WELCOME TO TAKE ANY CLASS IN THEIR AGE GROUP AS A MAKE-UP CLASS.</p>	<p style="font-size: small; margin: 0;">Initial Here: _____</p>
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**MUST COMPLETE PAGE 2**



ACCEPT & SIGN

**MEDICAL TREATMENT AUTHORIZATION / DAMAGES WAIVER / REFUND POLICY**

In consideration of the participation of the above named student enrolled in the Dance Arts Cherry Hill Inc. 2016-2017 school year, I personally, as the participating student(s) , or the parent or guardian of such student, intending to be legally bound, do hereby, for myself, my child/ward, my heirs, executors, and administrators, waive and release Dance Arts Cherry Hill Inc, their officers, employees, contractors, representatives, successors, and/or assigns from any damages which may have been sustained and suffered by the above named student, by me, or my child/ward(s) in connection with the above program, or any activities related thereto, including, without limitation, my traveling to or participating in and returning from any activity associated with the above named program.

Further, I grant Dance Arts Cherry Hill Inc. their officers, employees, contractors, representatives, successors, and/or assigns to authorize at it's discretion, any medical treatment that may be required for the above named student, myself, or my child/ward(s) during the 2016-2017 school year. It is understood that Dance Arts Cherry Hill Inc. will make every effort to contact me prior to the treatment of the above named student(s) or child/ward(s), and treatment by a licensed physician or medical staff person of a licensed emergency room will not be withheld in the event I cannot be reached.

My Medical Insurance is offered through: \_\_\_\_\_  
(Insurance Company)

Policy # \_\_\_\_\_ Group # \_\_\_\_\_

I UNDERSTAND **ALL TUITION AND FEES ARE NON-REFUNDABLE.**  
NO REFUNDS OR CREDIT GIVEN FOR ANY REASON INCLUDING BUT NOT LIMITED TO STUDENT ABSENCE AND WEATHER RELATED CLOSINGS. ALL PAYMENTS ANND CREDITS ARE NON-TRANSFERABLE.

**I UNDERSTAND MY CHILD WILL NOT BE ALLOWED TO ATTEND CLASSES IF MY ACCOUNT IS MORE THAN 14 DAYS PAST DUE.**

I, THE UNDERSIGNED, HAVE READ THE ABOVE MEDICAL TREATMENT AUTHORIZATION/DAMAGES WAIVER/REFUND POLICES AND UNDERSTAND ALL TERMS.

I EXECUTE THIS AGREEMENT VOLUNTARILY AND WITH FULL KNOWLEDGE OF IT'S SIGNIFICANCE.

\_\_\_\_\_  
(PARENT / GUARDIAN) (DATE)

**SELECT PAYMENT METHOD:** (If paying by credit card, a 3% Transaction Fee applies)

CHECK: (CHECK NO.) \_\_\_\_\_

CREDIT CARD:  MC /  VISA /  DISCOVER

CARD NO. \_\_\_\_\_ EXP \_\_\_\_ / \_\_\_\_ CVC 3 digit code \_\_\_\_\_

**Due at time of Registration:** Tuition under \$200.00 must be paid in full upon registration. Tuition over \$200.00 requires at minimum a 50% deposit + registration fee upon registration. Balance will be due the first week of classes. Registration forms must be completely filled out including medical release information and current email address.