

KELLY'S DANCE LOFT REGISTRATION FORM 2026/2027

Dancer Name: _____
Date of Birth: _____
Parent(s) or Guardian(s) Names: _____
Mailing Address: _____
Best Email(s): _____
Best Phone # to be reached at: _____
Alternate Phone #: _____
Emergency Contact (other than parent): _____ Phone #: _____
Any known medical conditions or allergies:

Class Payment Options:

- Tuition payments are NOT refundable.
- Tuition for the school year is broken into three payments.
- Tuition is non-negotiable and is contingent on the number of classes each student takes.
- If you are a new student to Kelly's Dance Loft, there is a one time registration fee of \$50.
- Regardless of payments, all classes must be paid for BEFORE class.

Policies:

- All returned checks will incur a \$30 fee.
- We reserve the right to refuse entrance to anyone due to inappropriate/disrespectful behavior or safety concerns.
- Students with unpaid tuition may not be allowed to participate in classes until said fees are paid.
- Students may contact KDL to schedule makeup classes if classes are missed.

Liability Disclaimer: As the parent or guardian, I release and hold harmless Bellini Associates LLC DBA Kelly's Dance Loft, its owners and operators from any and all liability, claims, demands and causes of action whatsoever, arising out of or related to any loss, damage, illness, injury, including death that may be sustained by the participant and/or the undersigned while in or upon the premises or any premises under the control and supervision of Kelly's Dance Loft, its owners and operators in route to or from any said premises. In the case of medical emergency, the undersigned gives Kelly's Dance Loft, its owners and operators permission to seek medical treatment for the participant in the event they are not able to reach a parent or guardian. By signing below, adult or guardian assumes full financial responsibility for all tuition and fees. Additionally, said person agrees to abide by all studio and payment policies.

I have read all of the above and all studio policies and agree.

Parent/Guardian Printed Name: _____
Parent/Guardian Signature: _____
Date: _____