

Socorra's Performing Arts Studio Class Registration Form

Please print student's names and fill in chart below to register for classes.

Students must meet the following age by SEPT 1ST for enrollment in age specific classes. (ONE FORM PER FAMILY)

STUDENT First Name Last Name	A G E / G R A D E	Date of Birth	3-4yr First Steps Day	5-6yr Happy Feet Day	Combo Class Day	Tap 1 2/3 Day	Jazz 1 2/3 Day Must take all 3 classes at this level	Ballet 1 2/3 Day	Pointe Day	Acro 1 Beg. 2/3 Int/Adv Day	Jumps & Turns	Contemp/ Lyrical	O T H E R	O T H E R	Performance & Co.Teams Auditions Required Co-enrollment in X- mas troupes & all classes besides baton. Please see team handbook for details.
<i>Example Suzie Ross</i>	<i>13 8th</i>	<i>10/22/ 2004</i>				<i>X Tues</i>	<i>X Tues</i>	<i>X Tues</i>	<i>X Tues</i>	<i>X Thur</i>					<i>X Perfor Comp</i>

First week of March registration open to current students ONLY.

Second week of March registration opens to the public.

CLASS SIZE IS LIMITED, SIGN UP QUICKLY!

See website calendar for dates.
www.socorrasperformingartsstudio.com

Mail form including last months tuition & registration fee of (tax included)
\$21.40 per student or \$32.10 per family to SPAS 1108 Pierce Street Sioux
City, IA 51105.

Please feel free to email questions to
Socorrasdance@gmail.com. We prefer email over phone.
We can respond quicker to your questions. 712-255-7420

1108 Pierce St. Sioux City IA 51105

Personal Information *(This person will be receiving all monthly billing, important updates & newsletters)*

Parents Name _____

Telephone # _____ Emergency # _____

Email Address *(required to receive monthly billing, important updates and newsletters)*

Address _____

City _____ State _____ Zip _____

How did you hear about us? _____

Date of registration:
Month _____ Day _____ Year _____ Time: _____ AM or PM

Parental Release

Please read over carefully and sign below.

- I have read and agree to abide by Socorra's Performing Arts Studio's policies regarding tuition, late fees, costumes, attendance, and dance attire.
- I understand that Socorra's Performing Arts Studio reserves the right to refuse instruction to anyone not abiding by Socorra's Performing Arts Studio's policies.
- I understand that Socorra's Performing Arts Studio reserves the right to cancel class if enrollment falls below five students per class.
- I understand that Socorra's Performing Arts Studio is not responsible for lost items, stolen items, or unclaimed merchandise.
- I understand that proper correction of technique may involve instructors physically touching a student so that they are able to learn proper alignment and form.
- I understand that participation in a dance program involves risk of possible injury. I understand that Socorra's Performing Arts Studio and its staff will not be held responsible for injuries sustained in class, while performing, or traveling to or from its facilities. I authorize Socorra's Performing Arts Studio to secure any emergency medical treatment my child might need. Preferred medical facility: _____
- Please list any medical concerns of which we should be made aware of: _____
- I give my permission of Socorra's Performing Arts Studio to include my child in photographs, video recordings, printed material and /or local media stories about Socorra's Performing Arts Studio. I understand Socorra's Performing Arts Studio will use these materials for promotional use only.

Parent/Guardian
Signature: _____

Date _____

Work Study- A limited number of work-study scholarships will be available to students willing to assist at the dance studio. SPAS staff nominate students to be enrolled in the work-study program who are good candidates for the program. Here are few things we look for when nominating work-study students. Nominees are selected by their: hard work & dedication in their own classes, able to demonstrate proper technique and form, enthusiastic positive attitude, leadership and role model abilities, prepared for classes and communicates well, goal oriented and good listener, loves children and works well with them, able to perform and complete tasks well and their potential in the future. Registration form and \$15.00 registration fee must be submitted by March 1st. Work-study positions include: Teacher's Helpers & Teachers Assistants. Nominees will be contacted by SPAS.

Office Use Only Accounting:

_____ Registration Fee _____ Add Class
_____ Monthly Fee _____ Drop Class

Office Use Only Front Desk:

_____ Computer Filed _____ Class Enrollment
_____ SPAS Email List _____ Paper Filed