



# Cricket's Performing Arts Registration Information

Student Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

Student Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

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

Primary Email \_\_\_\_\_ Phone # \_\_\_\_\_

First year enrolled at Cricket's (Student #1) \_\_\_\_\_ (Student #2) \_\_\_\_\_

Dance experience \_\_\_\_\_ Please list # of years, style of dance, teacher & school including Cricket's Performing Arts

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

Person responsible for payment \_\_\_\_\_ contact phone # \_\_\_\_\_

Mother \_\_\_\_\_ Phone (H) \_\_\_\_\_ (Cell/work) \_\_\_\_\_

Father \_\_\_\_\_ Phone (H) \_\_\_\_\_ (Cell/work) \_\_\_\_\_

Emergency contact \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

By signing below I state that I have read all of the policy statements in their entirety, and determine that I understand, agree with completely and support all policies, rules and regulations of Cricket's Performing Arts, and state that I am solely responsible for all payments due. I also agree to indemnify and hold Cricket's, it's owners employees, agents and representatives free from any and all claims, damage or liability arising out of or resulting from the use and occupancy of the premises and including any event authorized or sponsored by Cricket's School for the Performing Arts, it's owners, employees, agents or representatives. We give permission to Cricket's Performing arts to use any photographs—video-film-audio or any recording device and likeness for any and all purposed. We do not sell or share your information to 3<sup>rd</sup> party companies.

**Registration and Tuition Plan | \$30 Non-refundable Registration fee per student due at signing.**

REGISTRATION FEE is a yearly fee -- \$30.00 per student, however, if the student takes classes year-round (missing no more than 4 consecutive weeks), you will not owe a registration fee.

Signed by \_\_\_\_\_ Date \_\_\_\_\_

Credit Card Type :  Visa  Master Card

Name on the Credit Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_ V-Code: \_\_\_\_\_

Billing Street Address for Card: \_\_\_\_\_ Zip: \_\_\_\_\_

**Signature**

Authorized Signature (Primary): \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Signature (Joint): \_\_\_\_\_ Date: \_\_\_\_\_

Student	Class/Camp/Intensive/ Workshop Date/Time	Tuition
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_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Tuition \$ \_\_\_\_\_

Date	Cash/Check/ CC Auth. #	Amount	Description/Comments

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Notes:

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