

YOUTH CLASS REGISTRATION FORM

Session: Fall 2019
 Dates: August 12th – December 7th, 2019



Date: _____ Student Name: _____ Student DOB: _____

| Class title | Day of the week | Time |
|-------------|-----------------|------|
| | | |
| | | |
| | | |

Payment Selected:

| COST | amount | # of classes | EXPIRATION DATE |
|------|---|------------------|---|
| \$ | \$15 | 1 single class | All packages expire at the end of the class session: December 7th, 2019 All class purchases are VALID ONLY for the session in which they were purchased, please consider this when purchasing large package |
| \$ | \$70 | 5 class package | |
| \$ | \$130 | 10 class package | |
| \$ | \$200 | 16 class package | |
| \$ | \$360 | 30 class package | |
| \$ | OPTIONAL: I would like to add a donation to support a dancer who cannot afford classes (this can even be just an additional dollar or two) | | |
| \$ | TOTAL DUE (please note: no refunds or transfers for class fees; please also note expiration date above) | | |
| OR | | | |
| | I will be utilizing the Keshet Scholarship Program and therefore my scholarship application form is attached with my selected monthly payment option. | | |

| INITIALS | STUDENT AGREEMENTS |
|----------|---|
| | Keshet reserves the right to cancel any class if 5 or fewer students are enrolled |
| | Keshet will not allow a student to participate in classes for which they are tardy by 15 minutes or more. |
| | Keshet reserves the right to refuse admittance of the student to any class for which they are unqualified or inappropriate for due to age, level, or any other reason decided upon by Keshet staff. |
| | Keshet is not responsible for injuries sustained during class sessions, rehearsals, or performances. |
| | Appropriate, comfortable, and moveable clothing is to be worn. No jeans or khakis are allowed in class. |
| | There is a \$25 fee for all returned checks. |

Each student must have an "Information, Agreement, & Releases Form" (IAR) completed and signed prior to attending class.

Please select one:

| | |
|--------------------------|---|
| <input type="checkbox"/> | I am a RETURNING student , and have already filled out an IAR. All releases/waivers agreed to are still valid. |
| <input type="checkbox"/> | I am a NEW student and therefore have ATTACHED my IAR form to this registration. (If you are registering online and cannot access the IAR, please complete prior to your first class. Arriving early the day of is fine!). |

If you are a **RETURNING student** with an IAR already on file, please confirm and/or update the following info:

MY ADDRESS: same / change to: _____
 MY PHONE: same / change to: _____
 MY EMAIL: same / change to: _____
 MY EMERGENCY CONTACT: same / change to: _____
 MY MEDICAL INFORMATION: same / change to: _____
 PARENT EMPLOYER/s INFO: same / change to: _____
 ADD'L HOUSEHOLD INFO: same / change to: _____

I have read, understood, and agree to all of the information above. **SIGNATURE:** _____

Admin use only, initial when complete / updated 7.29.2019

Accepted by: _____

_____ IAR reviewed & attached (if new student only)
 _____ Scholarship Appl. Rec'd
 _____ Scholarship RECEIPT given
 _____ Schol. pkg purch'd in MB
 _____ Entered in MB
 _____ Entered in Google Form/Altru
 Please check ALL that apply: CS - Youth _____ JUMP _____ Adaptive _____ Camp _____ Scholarship _____