



PRIVATE LESSONS

Please note! Private students must provide at least a 24-hour notice for the cancellation of a private lesson in order to be able to reschedule their session for another date. **Failure to provide at least a 24-hour notice will result in a charge for the cost of the private lesson originally scheduled with the instructor.** If a student pre-paid for a package of private lessons, failure to provide at least a 24-hour notice of cancellation will result in the total time length of the missed session being deducted from the remaining pre-paid hours of private instruction.

CONTACT INFORMATION DATE ____/____/2011

NAME(S) _____

STREET ADDRESS _____

CITY, STATE, ZIP _____

HOME PHONE _____ ALT PHONE _____

E-MAIL ADDRESS _____

HOW DID YOU HEAR ABOUT THE STUDIO? _____

INSTRUCTOR(S) _____ CONFIRMED DATE(S)/TIME(S) _____

OBJECTIVES & GOALS

WHAT DO YOU WANT TO LEARN? WHAT ARE YOUR GOALS? IS THERE A SPECIFIC EVENT FOR WHICH YOU ARE PREPARING? IS THERE A PARTICULAR GENRE(S) YOU WANT TO LEARN? IF THIS IS TO PREPARE FOR A FIRST DANCE, HAVE YOU SELECTED A SONG AS YOUR 'FIRST DANCE?'

PRIVATE LESSON RATES & PACKAGES – 1 INSTRUCTOR

SESSION/PACKAGE	COST
INTRODUCTORY	\$40
1 PRIVATE	\$80
BUY 3 GET 1 FREE	BUY 5 GET 2 FREE
BUY 8 GET 3 FREE	BUY 10 GET 4 FREE

PLEASE NOTE

THESE RATES ARE FOR UP TO 5 INDIVIDUALS IN YOUR PRIVATE LESSON. THERE IS AN ADDITIONAL CHARGE OF \$10/PERSON PER HOUR FOR EACH INDIVIDUAL OVER 5.

PAYMENT TOTAL \$ _____

CASH CHECK # _____ GIFT CERTIFICATE VALUE \$ _____
 VISA MASTERCARD DISCOVER AMERICAN EXPRESS
 _____ - _____ - _____ - _____ EXPIRATION DATE ____/____/____
 CARDHOLDER'S NAME _____ SIGNATURE _____

OFFICE USE ONLY

DATE	AMOUNT	PAYMENT METHOD	ENTERED



PRIVATE LESSONS

Babs McDance Social Dance Studio Liability Release Form

I understand that there are risks of physical injury associated with, arising out of and inherent to the activity of dance. In recognition of this acknowledged risk of injury, I knowingly and voluntarily waive all right and/or causes of action of any kind, including any and all claims of negligence arising as a result of such activity from which liability could accrue to Babs McDance Social Dance Studio, its officers, agents, employees, instructors, subsidiaries, parent corporations, and all affiliated entities (hereinafter collectively referred to as "Babs McDance Social Dance Studio.")

I hereby agree to release Babs McDance Social Dance Studio and hold Babs McDance Social Dance Studio harmless of all liability, and hereby acknowledge that I knowingly and voluntarily assume full responsibility for all risks of physical injury arising out of active participation in dance on behalf of the participant.

I am aware that this is a release of liability and an acknowledgement of my voluntary and knowing assumption of the risk of injury. I have signed this document voluntarily and of my own free will in exchange for the privilege of participation.

If I am a minor, my parent and/or legal guardian has also signed this document releasing Babs McDance Social Dance Studio from any and all such liability described above and has acknowledged that I am knowingly and voluntarily assuming all risks of injury inherent to this activity.

I warrant the below information is complete and correct.

Student Signature

Date

The participant has my permission to participate in Babs McDance Social Dance Studio events. I further release Babs McDance Social Dance Studio of all liabilities associated with my child's attendance at Babs McDance Social Dance Studio.

Parent/Guardian Signature (if under the age of 18)

Date

Emergency Contact

Phone

Medical Contact

Phone