

European School of Performing Arts

360 Tomoka Avenue
Ormond Beach, FL 32174
386-677-6316
espa@espadance.com

Name of Student #1 _____ Student #2 _____

Student #3 _____

Parent(s) Name(s) _____

Address: _____

Home Phone #: _____ Work Phone # _____

Cell Phone#: Parent/Guardian 1 _____ Parent/Guardian 2 _____

Preferred Email: _____

Emergency Contact: _____ Phone#: _____

Please List Any Medical Conditions: _____

Does your dancer require life-saving medication/treatments to be kept on premises? _____

If yes, please explain: _____

How did you hear about us? _____

Student 1: Birthday _____ School _____ Grade _____

Classes requested (please list all class numbers from schedule form)

Student 2: Birthday _____ School _____ Grade _____

Classes requested (please list all class numbers from schedule form)

Student 3: Birthday _____ School _____ Grade _____

Classes requested (please list all class numbers from schedule form)

European School of Performing Arts Tuition/Fee Policy 2019-20

Tuition Payment Plans:

Plan I—Full Year Tuition (5% discount will be applied)

Plan II—First installment due at registration, remainder due January 1, 2020

Plan III—Ten (10) installments, 1st due at registration and then 1st of each month Sep-May

Drop-in Classes: \$18 per class, Adult Class Dance Card \$150 for 10 classes (\$15 per class)

Private Lessons: Fees vary by instructor.

*Private lesson fees are non-refundable unless cancellation notice is received at least 24 hours prior to the scheduled lesson.

Policy:

- There is an annual registration fee of \$35 for the first student, \$30 for the second, and \$25 per student after that. **The first tuition payment will also be due at the time of registration.**
- You may stop in during regular office hours to register and pay or you may mail your registration, with payment, to the studio in advance.
- Tuition payments are due no later than the first of the month.
- Currently we accept cash, checks made out ESPA, or credit cards for all tuition fees.
- There is a 3% fee added to all credit card transactions.
- Families with more than one registered dancer will receive a 5% discount on the 2nd, 3rd, 4th, etc. dancers. (This does not apply to production and costume fees.)
- Students registered at ESPA are considered registered for the entire season and payments are expected to be paid for the season. If a student must withdraw for any reason other than serious injury, illness or relocation, **a 30 day written notification is required or families will continue to be responsible for all further tuition charges.**
- No reimbursement or credits will be made to your account for missed classes. A student may attend another class in their level or a lower level as their make-up class.
- All tuition payments are due the 1st of each month.
- A late fee of \$30 will be charged to your account if we have not received payment by the 10th day of each month.
- A \$30 fee will be charged for all returned checks.
- If payment has not been received one month past your payment due date, and no effort has been made to contact the office to accommodate extenuating circumstances, your student will be suspended from class. (We will always make an effort to work with any family with extenuating circumstances, but you must contact us in order to work out a payment plan.)
- Students with delinquent accounts may not be permitted to participate in productions.
- Costume fees: \$110 per class/costume. Fees are due by December 1st, and may be paid in installments due October 1st, November 1st and December 1st.

European School of Performing Arts

Payment Agreement 2019/20

Non-refundable Registration Fee: \$ _____

(\$35 first student, \$30 second student, \$25 each additional sibling)

Annual Tuition Student #1: \$ _____

Annual Tuition Student #2: \$ _____

Annual Tuition Student #3: \$ _____

*To calculate annual tuition, multiply monthly tuition X 10

Costume Fees Student #1: \$ _____

Costume Fees Student #2: \$ _____

Costume Fees Student #3: \$ _____

Total Tuition and Fees: \$ _____

Payment Plans (select one of the following):

____ Plan I—Full Year Tuition (5% discount will be applied)

____ Plan II—First installment due at registration, remainder due January 1, 2020

____ Plan III—Ten (10) installments, 1st due at registration and then 1st of each month Sep-May

We accept cash, checks (payable to ESPA) or credit cards (3% transaction fee applied).

I have read, understand and agree to adhere to all ESPA Tuition and Fee Payment policies. I agree to pay all applicable tuition and fees, and to follow stated policy for withdrawal, if applicable.

Signed: _____ Date: _____

(Parent/Guardian Signature)

European School of Performing Arts & Wheat-Paden Inc

2019/20

WAIVER OF LIABILITY, RELEASE, ASSUMPTION OF RISK
AND INDEMNITY AGREEMENT

I affirm that I am 18 years of age or older and mentally competent to enter into this Waiver, Release, Assumption of Risk and Indemnity on behalf of _____ (Insert name if 18 or older, or name of minor child under 18) who is voluntarily participating in one or more instructional dance classes or other events offered by European School of Performing Arts & Wheat-Paden Inc.

I am not aware of any medical condition that I/my minor child have/has which preclude me/my minor child from participating in dance activities. I understand there is a risk of injury associated with said activities and that such injuries may be caused in whole or in part by the student (or my minor child), or by the actions or inactions of other students or instructors.

In consideration of my/my minor child participation in dance instruction, events, master classes, etc. offered by European School of Performing Arts & Wheat-Paden Inc., I/we realize that participation in dance classes and activities could involve some possible personal injury. Despite precautions, accidents and injuries may occur. By signing this release form, I/we (the dancer and parent/guardian) assume all risks related to the use of any and all spaces used by European School of Performing Arts, Ormond Beach, Florida.

I/we agree to release and hold harmless European School of Performing Arts and Wheat-Paden Inc, including its teachers, dancers, staff members, and facilities used by both entities from any cause of action, claims, or demands now and in the future. I/we will not hold European School of Performing Arts or Wheat-Paden Inc. liable for any personal injury or any personal property damage, which may occur on the premises before, during or after classes. Furthermore, I/we agree to obey the class and facility rules and take full responsibility for my/our behavior in addition to any damage I/we may cause to the facilities utilized by European School of Performing Arts & Wheat-Paden Inc.

I understand that European School of Performing Arts & Wheat-Paden Inc are licensed and insured organizations. In the event that I/we should observe any unsafe conduct or conditions before, during or after my/our classes, I/we agree to report the unsafe conduct or conditions to the Executive Director, Artistic Director, instructor or staff member as soon as possible.

Dancer's Name: _____ Age: _____
(Print)

Dancer's Signature: _____ Date: _____
(If unable to sign, parent/guardian sign only)

Parent/Guardian
Name: _____ Phone: _____
(Print)

Parent/Guardian Signature: _____ Date: _____

EUROPEAN SCHOOL OF PERFORMING ARTS PHOTO RELEASE FORM

I hereby grant European School of Performing Arts permission to use my likeness and/or that of my minor child in a photograph, video, or other digital media (“photo”) in any and all of its publications, including web-based publications, without payment or other consideration.

I understand and agree that all photos will become the property of European School of Performing Arts and will not be returned.

I hereby irrevocably authorize European School of Performing Arts to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

I hereby hold harmless, release, and forever discharge European School of Performing Arts from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I HAVE READ AND UNDERSTAND THE ABOVE PHOTO RELEASE. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENTS/GUARDIANS AS EVIDENCED BY THEIR SIGNATURES BELOW. I ACCEPT:

Print Name: _____

Signature: _____ | Date: __ / __ / ____

If under 18, both parents must sign individually and as parent/guardian.

Parent Signature: _____ | Date: __ / __ / ____

Parent Signature: _____ | Date: __ / __ / ____