



VITACCA

VOCATIONAL SCHOOL FOR DANCE

Division D
Registration Form 2023-24
Term One | Aug. 14 - Dec. 16
Term Two | Jan. 3 - May 11
 Vitacca Vocational School for Dance
 9391 Grogans Mill Rd., Ste. B1
 The Woodlands, TX 77380
 WoodlandsAdmin@VitaccaDance.com

Please complete all requested information and return to Vitacca onsite, by mail or email prior to first day of class.

DANCER'S INFORMATION

Dancer's Name: _____
 Street Address: _____
 City: _____ State: _____ Zip: _____ Age: _____ Birthdate: _____ Gender: _____
 School: _____ Grade: _____ Home Phone: _____ Dancer Cell Phone: _____
 Dancer E-mail: _____

PARENT/GUARDIAN Responsible for Payments:

Mother's Full Name: _____ **Father's Full Name:** _____
 Mobile Phone: _____ Mobile Phone: _____
 E-mail: _____ E-mail: _____

EMERGENCY CONTACT

Name: _____ Relationship: _____ Phone #: _____

AGREEMENTS AND RELEASE

Please initial to notate acknowledgement and agreement.

_____ Vitacca Vocational School for Dance, Woodlands Division D, PP1 & PP2 classes are closed for viewing. Parents are invited to an in-studio demonstration week in the Fall & Spring. PP parents are invited to the December In-Studio Demonstration.

_____ Vitacca Vocational School for Dance, Woodlands students wishing to participate in Vitacca performances may not take ballet, contemporary or modern lessons at other studios/schools.

_____ Vitacca Vocational School for Dance, Woodlands students may not participate in performances for another studio in which the student is performing Ballet, Contemporary or Modern.

_____ All tuition and fees are non-refundable (includes paid full year tuition, and all other fees). (In the case of serious illness or injury, exceptions may be made at the discretion of the School.)

_____ Withdrawal from the School must be made in writing 30 days prior to the last lesson attended. Tuition will be charged until 30 days after the written notice is received. This does not apply to discounted pre-paid tuition. There are no refunds.

_____ Division training costs (tuition) is based on a 35-week season and divided into ten payments from August through May. Month to month registration is not allowed.

_____ Covid-19 Release Statement #1- Vitacca Vocational School for Dance (Vitacca Dance) has put in place heightened cleaning measures to reduce the spread of Covid-19. However, Covid-19 has been proven to be highly contagious and asymptomatic in some persons. Therefore, Vitacca Dance cannot guarantee that you or your child(ren) will not become infected with Covid-19. Further, attending Vitacca Dance could increase your risk and your child(ren)'s risk of contracting Covid-19. By initialing you acknowledge the contagious nature of Covid-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by Covid-19 by attending Vitacca Vocational School for Dance, Woodlands, and Houston locations and that such exposure or infection may result in personal injury, illness, permanent disability, and death.

_____ I understand as of June 20, 2021, masks will be optional at Vitacca Vocational School for Dance Houston and Woodlands.

Participation Release Agreement

_____ In consideration for receiving permission to participate in this class, performance, rehearsal, or any and all activities related thereto, including but not limited to travel between sites or locations ("Activities"), I hereby release, indemnify, and covenant not to sue Kelly Ann Vitacca, Vitacca Vocational School for Dance, Houston or Woodlands, and any associates or employees thereof ("Releasees"), for any and all claims, costs and causes of action for property damage or personal injury, sustained by me while participating in Activities, whether arising from statute, code, ordinance, tort, common law or other source.

_____ I acknowledge that Activities I will perform may be physically strenuous. I know of no physical or mental condition, which would preclude or inhibit my full participation in Activities. I am fully aware of the risks and hazards involved with Activities, including but not limited to slips, trips, falls, breaks, heat stroke, heart attack, exhaustion, dehydration, and other related injuries. I choose to voluntarily participate in Activities with full knowledge that they may be hazardous to my property and me.

_____ I understand that Releasees do not maintain any insurance policy covering any circumstance arising from my participation in Activities or any event related to that participation. I am aware and understand that I should obtain and review my personal insurance coverage. In signing this release, I acknowledge that I have read and understood the Release, that I am at least eighteen (18) years of age or my guardian is at least eighteen (18) years of age and fully competent.

Photo | Video | Release Agreement

_____ In consideration of good and valuable considerations, the receipt of which is hereby acknowledged, I hereby grant to Vitacca Vocational School for Dance, Woodlands, its nominees, designees, successors and assigns, or those for whom they are acting, the absolute right and permission to copyright, and/or use, and/or publish photographs/videos of my dancer in class or at performances, or in which I may be included in whole or in part, or composite, or distorted in character or form, in conjunction with my own or any other picture/video or reproductions thereof made at its studios or elsewhere, for art, advertising, business or trade, news reporting, social media, website, or any other lawful purpose whatsoever. I hereby waive any right that I may have to inspect and approve the finished product or the advertising copy that may be used in connection therewith or the use to which it may be applied.

School Training Program - Division D

Class Selection:

For greatest growth and development, it is highly recommended dancers attend all classes listed below. Those listed with * are optional, check the boxes to register. *PP Dancers are required to attend all italicized classes and weekly rehearsals as scheduled.*

Monday 5:00-6:00 Modern

Monday 6:00-7:15 Ballet

Monday 7:15-8:00 Pointe

Tuesday 3:30-5:00 Ballet

Tuesday 5:00-5:45 Pointe

Tuesday 5:45-6:45 Variations Study

Tuesday 6:45-7:45 Contemporary*

*Wednesday 6:15-7:00 Progressing Ballet Tech (PBT)**

Wednesday 6:15-7:15 Adv. Jazz*

Wednesday 7:15-8:30 Ballet

Thursday 6:15-7:30 Ballet

Thursday 7:30-8:15 PP2 Classical Ensemble, invite

Saturday 9:00-10:15 Ballet

Saturday 10:15-11:15 Pointe

Tuition and Payment Requirements:

To reserve a space in the class(es) you have selected above you must:

Place an "X" beside OPTION 1 or 2 below to select your payment plan.

Enclose the required tuition payment and annual registration fee with this registration form as indicated by your choice of payment plan below.

<p><input type="checkbox"/> Option 1 Pay in Full</p>	<p><u>Amount due at the time of registration (includes registration fee):</u></p> <p><input type="checkbox"/> \$6070 mandatory classes</p> <p><input type="checkbox"/> Add Classical Ensemble + \$600</p> <p><input type="checkbox"/> Add Jazz + \$700 <input type="checkbox"/> Contemporary + \$700 \$ _____</p>
<p><input type="checkbox"/> Option 2 10 Installments: Tuition is divided into 10 installments</p>	<p><u>Amount due at the time of registration:</u> \$652 mandatory classes Add Jazz + \$70 Contemporary + \$70 Add Classical Ensemble (invite non-PP2) +\$60 This amount includes your registration fee of \$50.00 plus the first of ten installments. \$ _____</p> <p><u>Division D Installment Amount:</u> \$602 mandatory classes Add Jazz + \$70 Contemporary + \$70 Add Classical Ensemble (invite non-PP2) +\$60 There are 10 installments, the 1st is due with registration and the other 9 installments are due on the first day of the following months: August-May. This is not a monthly tuition. You are committing to the year-round program, which is divided into 10 installments for your convenience. \$ _____</p>

Health Information

Please list any allergies: _____

Please list additional health information if necessary: _____

I hereby give my permission to Vitacca Vocational School for Dance personnel to authorize any minor emergency medical treatment that may be required during Vitacca Vocational School for Dance program including: Intensives, Dance Class, Invite Class, Open Class, Rehearsals, Master Classes and Performances. I understand that I am responsible for all charges because of such care and medical treatment. Name of Participant, Parent or Guardian: _____

Signature: _____ Date: _____

Payment Information

I understand that all tuition and fees are NON-REFUNDABLE. I also understand make-ups for missed classes are based on availability. I understand a credit card **must be on file** for my dancer to participate in class. **Initial here** _____

Name on Credit Card: _____ Card Type: _____ (Amex and Discover **not** accepted)

Billing Address: _____ City: _____ State: _____ Zip Code: _____

Credit Card Number: _____ Expiration: _____ Credit Card ID #: _____

I authorize Vitacca Vocational School for Dance to make charges to my account on the first of each month for the agreed tuition amounts written below and within my registration information or if paying by check, I authorize Vitacca Vocational School for Dance to make charges to this account if payment is not otherwise received within three days of due date, including a \$30 late fee. An NSF fee of \$25 will be applied to all declined payments. Payments made with a credit card incur an additional 1% fee (except for tuition payments).

Complete agreed payment method and charges:

_____ Division D Tuition in full + \$50 registration fee of \$ _____

_____ Monthly Payments of \$ _____ charged on credit card stated above on the 1st of the month

Credit card holder printed name: _____

Signature: _____ **Date:** _____