

# HESTER ACADEMY OF IRISH DANCE 2021-2022 REGISTRATION FORM

Dancer(s): \_\_\_\_\_

Dancer's Age(s): \_\_\_\_\_

Dancer's Date of Birth: \_\_\_\_\_

Parent/Guardian Name (First and Last): \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Yearly Registration Fee: \$35 per family

Tuition is charged September through June (to be paid on the first of each month through Cash, check (made out to Hester Academy) or Venmo @James-Hester-5.

\*There will be no deductions for scheduled off days/holidays. If we are closed due to inclement weather, JJ will do his best to reschedule the class. If JJ closes due to illness or personal reasons, a deduction will be given for that class.

## **Group 1: Beginner and Advanced Beginner**

1 class per week=45 minutes-\$60/month

2 classes per week=1 hour and 30 minutes- \$95/month

## **Group 2: Novice**

1 class per week= 1 hour- \$70/month

2 classes per week=2 hours- \$105/month

## **Group 3: Prizewinner, Prelim, Open**

1 class per week=1 hour and 30 minutes- \$95/month

2 classes per week=3 hours- \$135/month

Deduct 10% for each additional sibling.

**Please put an X for each child dancing next to their group  
(please ask JJ if you are unsure of your group):**

\_\_\_\_\_ Group 1.      \_\_\_\_\_ Group 2.      \_\_\_\_\_ Group 3

**Please put an X next to One Class a week option or Two Classes a week option:**

\_\_\_\_\_ One Class a week.      \_\_\_\_\_ Two Classes a week

**MEDICAL**

Please inform me of any medical related issues, allergies, or special needs your child may have prior to their attendance to class.

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**EMERGENCY CONTACT**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Relation to child: \_\_\_\_\_

**PICK UP PERMISSION**

Please list all people who have permission to pick up your child from dance class (parents, babysitters, grandparents, step-parents etc.).

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**LIABILITY RELEASE/PHOTO RELEASE** I, the undersigned parent/guardian, release The Hester Academy of Irish Dance and the Ice House Facility (200 Southern Boulevard Camden-Wyoming, Delaware) from liability for any bodily injury that may result from participating in classes. I permit the Hester Academy of Irish Dance to seek medical treatment as deemed appropriate through EMS/911 and or local hospitals. The Hester Academy of Irish Dance has my permission to photograph my child for social media advertising, website content, etc. I also release The Hester Academy of Irish Dance from any liability should me or my dancer become ill due to COVID-19. I understand the risks and I am allowing my child to participate in this activity despite the risks.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_