Adagio School of Performing Arts

Terms of Commitment and Payment Guidelines

Period Term:

Fall/Winter/Spring: September 9, 2013 – May 31, 2014

Summer: June 1, 2014 - August (Summer Dance Festival), 2014

Payment Schedule:

Payments will be automatically deducted from a designated bank account on a monthly basis.

Tuition Fees:

Your monthly fees include dance training for the specified number of classes per week. We will also be deducting any other fees incurred including registration fees, clothing costs, etc.

Payment Terms:

For the 2013/2014 year, the completed registration package must be completed by August 31, 2013.

Members wishing to take personal time off when regular training is scheduled are advised that tuition fees will not be waived or prorated, unless authorized by Rachel Martin.

Adagio dance training requires a commitment from each family for the entire period term in order to be successful. However, we do realize situations occur which make continuing not possible. Such circumstances, which will result in the participant withdrawing from the classes before completion of the year, must be approved by Adagio on a case by case basis. Exiting the commitment before completion of the terms requires members to file appropriate paper work to terminate account activity, ACH, and balance all debts.

Types of Payment:

Automatic withdrawal (ACH)

Medical Issues:

In the event of an injury, extended illness or other special medical circumstances lasting more than a month in length, a parent may request in writing to Adagio to waive fees for lost time.

Child's Name:		
Child's Name:(First, Last)		
Parent's Name:(First, Last)		
(First, Last)		
Address:		
City:	State:	Zip:
Work Phone: () Home Phone: () Cell Phone: (
Email:		
Emergency Contact:		
By enrolling my child at Adagio School of Performing Arts, I the Terms of Commitment and Payment Guidelines.	recognize that I am obligated to follo	w the rules and policies of the program as outlined in
Parent/Guardian Signature Parent R	Date Release Form for Media Recordi	ng
I, the undersigned, do hereby grant permission for Adag . Such use includes the images, and/or video taken of my child for use in mater.		
images, and/or video taken of my child for use in mater, and newsletters, videos, and digital images such as those child's image in the following ways:		
I give unrestricted permission for my child's image to b for a variety of purposes and that these images may be u		
Darant/Guardian Signatura	Date	

AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENTS (ACH DEBITS)

Company Name: Adagio School of Performing Arts, INC

I (we) hereby authorize **Adagio School of Performing Arts, INC** hereinafter called Company, to initiate debit entries to my (our) **Checking Account** indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of the ACH transactions to my (our) account must comply with the provisions of U.S. law.

CUSTOMER'S NAME			
DEPOSITOR (BANK) NAME_			
CITY	STATE	ZIP	
ROUTING NO	ACCOUNT NO.		
	all force and effect until COMPANY has ruh manner as to afford COMPANY and DE		
DRAFT DATE: 10TH OF THI	E MONTH		
*Please attach a voided check to	o this completed form. Your ACH inf	ormation will be stored in a s	secure location.
NOTES:			
• ACH draft is a continuous pla 10, 2013 through August 31, 2	an, which automatically renews month 2014.	ly. The duration of the automa	atic withdrawal is September
 Any fees/purchases that incur transaction. 	(i.e. registration fees, non-sufficient f	funds, clothing, etc.) will also b	be added to the monthly
 Should any payment not be help plus a \$35 service fee applied 	onored by my DEPOSITORY for any by the COMPANY.	reason, I realize that I am still	responsible for that payment
<u> </u>	t to terminate membership upon non-p		
1 2	leducted on the business day after if th		2
	count information at least 2 weeks befation will be updated by your draft da		COMPANY can not
NAME(S)			
(please print)			
SIGNATURE		DATE	

WAIVER AND RELEASE Adagio School of Performing Arts

INDIVIDUAL AGREEMENT: I intend to use or participate in some or all of the activities, facilities, equipment, programs and services offered at or by Adagio School of Performing Arts INC ("Adagio").

1.	payment of any fee or charge, I do hereby waive, agents, employees, representatives, executors, su for injuries or damages resulting from any participation.	allowed such use or participation at Adagio, in addition to the release and forever discharge Adagio and its owners, officers, accessors and assigns from any and all responsibilities or liability ation in any aspect of any activities or programs or my use of ising out of any activities or events occurring at Adagio. Please Initial		
2.	equipment, is potentially hazardous and there is the (including myself) has a different capacity for partifacilities, programs and services at Adagio are eduthat, I agree that my participation in any and all of requested or required by Adagio. I further agree the	cibility, fitness, exercise and sports activities, including the use of the risk of injury and even death. I also understand that everyone cipating in physical activities. I am also aware that all activities, ucational, recreational, social, or self-directed in nature. Knowing the activities at Adagio strictly voluntary and has not been not my participation in any and all of the activities at Adagio is at njury, illness, damage or loss that might result. I also agree to y of my personal property. Please Initial		
		Tiedde iiilidi		
3.	other illness that would prevent my participation in had a physical examination and have been given programs, facilities and services at Adagio, or that Accordingly, I do hereby assume all responsibility	e physically sound and suffering from no condition, impairment, disease, infirmity or ent my participation in any of the activities at Adagio. I acknowledge that I have either and have been given a physician's permission to participate in these activities, rices at Adagio, or that I have decided to participate without the approval of my physician. Sume all responsibility for my participation in such activities, programs, facilities and use of any and all equipment and machinery in connection with them. Please Initial		
4.	sometimes be conducted by persons who may no professionals. I accept the fact that the skills and coolunteers will vary according to their training and made by Adagio to offer assessment or treatment	quipment, programs and services offered at Adagio may to be knowledgeable, licensed, certified or registered instructors or competencies of Adagio employees, agents, representatives or experience. I also understand that no claim has been or is being of any mental or physical disease or condition by those who are byed by Adagio to provide such professional services. Please Initial		
	NT/GUARDIAN-CHILD AGREEMENT: I am hereby d/children's names in the lines provided.)	giving my consent and permission for my child/children		
underst I ackno facilities is a fan	stand that under certain circumstances they will be a pwledge that I am responsible for their actions, and as or equipment or exhibiting proper behavior, they we	activities and programs for which they are registered. In able to workout or participate in activities without direct supervision. That if they are not demonstrating proper usage of machines, will face appropriate disciplinary actions. I understand that Adagio support, motivation, encouragement and supervision to succeed		
Particip	pant Name:(Please Print)	Date:		
Particip	pant's Signature: (If member is under 18 – Parent's Signatur	re) Date:Date:		