Loperfido Dance Academy
2025-2026 Registration Form

*Please complete this form, and submit it with your **registration fee, and first tuition payment**. This will guarantee your place in class. All classes begin the week of September 8, 2025.*

Student Name: _____

Address: _____

City_____State_____Zip _____

Cell Phone # & Carrier: _____ Home Phone #: _____

Email:_____

Name Parent/Guardian #1: _____#2: _____

In case of emergency, please notify: _____

Emergency telephone #1_____Tel #2 _____

Student's Age: _____ Birth Date: _____

Please list the **class, day and time** of the class you are enrolling in.

_____

_____

Please list any health or physical restrictions:

How did you hear about our school? Website ☐ Social Media ☐ Word of mouth ☐ Flyers ☐ Other ☐

☐ Registration Fee: $45 per child; $55 per family

Credit Card Information:

Cardholder Name (As shown on card):_____
Card Type: Visa ☐ Mastercard ☐ Discover ☐
Card Number: _____
Exp Date: _____ Security Code (CVV): _____

I authorize Loperfido Dance Academy to debit my account for all payments, including tuition. I understand that my information will be saved to file for transactions on my account.

Signature: _____ ***Date:*** _____

The Loperfido Dance Academy is not liable for any injury that may occur on the premises. The Loperfido Dance Academy is not responsible for lost or stolen items. I have also received a copy of the Loperfido Dance Academy brochure, and agree to abide by the academy policies listed in it. I agree to the above disclaimer.

Parent/Guardian Signature: _____ ***Date:*** _____