

**PLEASE PRINT AND DETACH**

<b>Class Name</b>	<b>Class Day</b>	<b>Class Time</b>	<b>Class Length</b>	<b>Student's Name</b>	<b>AGE</b>	<b>Birth Date: Mo./Day/Yr.</b>	<b>School Name</b>	<b>Grade Sept. 2008</b>

**NOTE: Preschoolers and Kindergartners MUST BE age specified by 09/01/08 - copy of birth certificate MUST accompany registration**

Please read carefully and be aware that, in signing up and participating in the above program, you will be waiving and releasing all claims for injuries, arising out of this program, that you or the above participant might sustain.

I do hereby fully release and discharge Jo's Footwork Studio, its officers, agents, servants and employees and the Village of Western Springs, its Recreation Department and their officers, agents, servants and employees from any and all claims from injuries, damage or loss which I (or dependents under 18 years of age) may have or which may accrue to me (or dependents) on account of my (their) participation in the above Jo's Footwork Studio sponsored activities.

I further agree to indemnify and hold harmless and defend Jo's Footwork Studio, its officers, agents, servants and employees and the Village of Western Springs, its Recreation Department and their officers, agents, servants and employees from any and all claims resulting from injuries, damages and losses sustained by me (or dependents under 18 years of age) and arising out of, connected with, or in any way associated with these activities sponsored by Jo's Footwork Studio. 2008/2009. I also grant permission to use my child's picture/image on the website and/or advertising for Jo's Footwork studio.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
*(Parent's signature if participant is under 18)*

Student's Address: \_\_\_\_\_

Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ CELL#: \_\_\_\_\_

*Office Use Only*  
SESSION I

SESSION I I

SESSION I I I

SESSION I V

**TUITION FOR SESSION II, III, & IV IS DUE BEFORE THE FIRST CLASS.**  
 PLEASE MAKE CHECKS PAYABLE TO **JO'S FOOTWORK STUDIO**. THERE IS A \$10.00 LATE CHARGE ON TUITIONS PAST DUE; A \$25.00 SERVICE CHARGE ON ALL RETURNED CHECKS.

**REFUND POLICY:** Registration fees and Costume fees are not refundable.  
 A refund of 50% of tuition for session if drop occurs in 1st week of session.  
*No refunds after 1st week of session. **NO EXCEPTIONS!***

Total Individual Hours. (*1<sup>st</sup> student*) \_\_\_\_\_ hrs. Tuition due \$ \_\_\_\_\_

Total Individual Hours. (*2<sup>nd</sup> student*) \_\_\_\_\_ hrs. Tuition due \$ \_\_\_\_\_

Total Individual Hours. (*3<sup>rd</sup> student*) \_\_\_\_\_ hrs. Tuition due \$ \_\_\_\_\_

Total Individual Hours. (*4<sup>th</sup> student*) \_\_\_\_\_ hrs. Tuition due \$ \_\_\_\_\_

**PLUS Family Registration Fee.....\$ 20.00**

**TOTAL ALL TUITION FOR SESSION I DUE & ENCLOSED = \$ \_\_\_\_\_**

*WAIVER AND RELEASE OF ALL CLAIMS AND AUTHORIZATION*

*Jo's Footwork Studio, 1500 Walker Street, Western Springs, IL 60558*