

RHYTHM GENERATIONS

384 Vine St. St. Catharines ON, L2M 4T5
(905) 937-9961 | (fax) (905) 937-8824
jrhythmg@gmail.com | rgdance.ca

Greetings to all our family in dance,

May we welcome one and all to our 2016-2017 Dance Season!

We have enclosed the pertinent information for this years dance season. We kindly ask that you take a moment to read it over carefully for any changes and new things that we are introducing this year... such as payment by Credit Card, checking us out on Facebook, new email address etc..

MAKE NOTE: CLASSES WILL START THE WEEK OF OCTOBER 11th

If you know of anyone who would be interested from any of our programs here at Rhythm Generations please share this brochure with them or lead them to the website or contact us at the studio.

As it is our firm desire to serve our community to the best of our ability so we also ask that you keep in mind that if you do not see what you want, we are approachable and willing to do any class given the interest shown, time and teacher availability.

So with all that said... we are off again and very excited about our..

OPEN HOUSE: SATURDAY SEPTEMBER 10th, 1-4 pm

Hope to see you there!!

Love and blessings to our "shining stars",

JoAnne, Alexandria, Amanda, Anneke, Amanda G. & Esther

HOW TO REGISTER

Registration is ongoing and can be done by mail or pre-arranged appointment only.

Payment Options:

All fees are to be paid in 2 equal installments, dated Sept 23rd, 2016 & January 10th, 2017.

Students who register for **2 or more classes** or families with **2 or more students** enrolled may pay over **3 payments** as follows:
September 23rd, 2016, November 23rd, 2016 & January 10th, 2017

Please note: There will be a **25% discount** for any student registered in a 2nd class applied to the lesson fee overall.
The costume fee remains the same.

Payments may be in Cash, Cheque or by Credit Card in person or by phone. Receipts come automatically to your e-mail account! If paying by cheque please submit cheques **post-dated**, for the above dates with registration. Please make cheques payable to **JoAnne Gadula**.

There is a 4 lesson trial period for **new students** and those returning students who are trying a **new program only**. If a student quits after that period there is **no refund** on 1st payment.

Also, there is **no refund** for costumes should a student drop out after 4 weeks into a session. The amount that you have paid in your 1st installment is considered a deposit.

Please note:

There will be a \$10 late fee applied for any student returning from last season who has not registered by **September 23rd, 2016**.

Please make all communications to **384 Vine St. 905.937.9961** or **905.937.7677**

It is always a pleasure to hear from you, so if you have any questions or concerns, you may call me Monday to Friday from 9am-5pm. If you leave a message with Nina the receptionist, I will get back to you at my earliest convenience. You may also contact me by email at jrhythmg@gmail.com.

REGISTRATION FORM

| Program | Day/Time <small>(Please insert appropriate day/time for desired classes)</small> | Fee <small>(Please insert appropriate fee for desired classes)</small> |
|------------------|---|---|
| Tiny Toes | | |
| Ballet | | |
| Jazz | | |
| Tap | | |

| Costume Size | Ballet | Jazz/Tap |
|--------------|--------|----------|
| 3-6x | \$80 | \$70 |
| 7-10 | \$85 | \$75 |
| 12-14 | \$105 | \$85 |
| S/M/L | \$135 | \$100 |

| Class Length | Fee |
|--------------|------------|
| 45 minutes | \$260/year |
| 1 hour | \$350/year |

Costume Size _____ Number of Costumes _____ Total Fee: _____

Please complete the following fees table:

| Item | Fee |
|---|------|
| Lessons (for season) October - May | |
| Costume(s) | |
| Additional Administration & Recital Fees <small>(2 adult Praisentation tickets/extras, 1 photo package, hosiery, class agenda & CD for practice)</small> | \$60 |
| DVD (optional) \$25 each | |
| Additional Photo (\$12/package) | |
| Late Fee - Registering after Sept 23 add \$10 | |
| TOTAL OF ALL APPLICABLE FEES | |

1st Installment: Sept 23, 2016 - 1/2 of fees _____
2nd Installment: January 10, 2017 - balance of fees _____

Please Note: Receipts for Income Tax will be issued for lessons.
 Please fill out the Registration/Liability form and make ***cheques payable to JoAnne Gadula***

RHYTHM GENERATIONS 2016-2017 DANCE SEASON

PERSONAL INFORMATION

Name: _____ Birthdate: _____

Address: _____

City: _____ Phone: _____

Postal Code: _____ Email: _____

Referred By: _____

This MUST be signed before participating in the registered program(s):

The undersigned hereby:

1. Certifies that the person registered on this form is in good health and with no medical condition which would prohibit vigorous participation in the registered program.
2. Consent to the full participation of the aforementioned person in the registered program(s) fully recognizing and accepting the inherent risks involved in the activities.
3. Releases and holds harmless, **RHYTHM GENERATIONS**, and its employees, from all liability for any injury or damage to person or property howsoever caused, resulting from participation by the aforementioned student in the program(s).

Emergency Contact: _____

Phone Number: _____

Health Card #: _____

Signature: _____

Date: _____