

2018-19 PIZAZZ BATON, POM AND DANCE REGISTRATION FORM

STUDENT INFORMATION:

Student Name:	Date of Birth:	Age:
School:	Grade:	
Primary Address:	City:	Zip Code:
Parent Name:	Home Phone:	Emergency Contact? Y / N
*E-Mail Address: <input type="checkbox"/>	Cell Phone:	
Parent Name:	Home Phone:	Emergency Contact? Y / N
*E-Mail Address: <input type="checkbox"/>	Cell Phone:	

*Please check the box if you WANT your email address added to our distribution list for weekly newsletters and Pizzazz info.

ALL PERSONS AUTHORIZED TO PICK UP STUDENT (in addition to those listed above):

Name:	Relationship to child:	Phone:
Name:	Relationship to child:	Phone:
Name:	Relationship to child:	Phone:

NAMES OF SIBLING(S) ALSO TAKING CLASSES AT PIZAZZ:

HOW DID YOU HEAR ABOUT OUR STUDIO:

PREVIOUS BATON OR DANCE TRAINING: (i.e. number of years, technique studied, etc)

Liability Waiver:

I hereby release and absolve PIZAZZ BATON, POM & DANCE, its Directors and Supervisors from any liability for any accident or injury that might occur when appearing as a participant or as a spectator in this activity.

SIGNATURE OF PARENT/GUARDIAN:

DATE:

Agreement for participation and treatment of minor injuries:

This signature is required for participation of all minor children. By signing this form, the parent or guardian consents to the minor's participation in the PIZAZZ program and treatment of any sort deemed necessary by the proper supervisors for any illness or injury resulting from minor's participation in this activity.

SIGNATURE OF PARENT/GUARDIAN:

DATE:

Facts concerning child's medical history including allergies, medication being taken, and any physical impairments to which a physician should be alerted:

EMERGENCY MEDICAL FORM

Purpose—To enable participants, parents and guardians to authorize the provision of emergency medical treatment for their children who become ill or injured while under PIZAZZ Baton, Pom & Dance authority, when parents or guardians cannot be reached.

PLEASE COMPLETE ONLY PART I OR PART II BELOW

PART I—TO GRANT CONSENT AND RELEASE OF INFORMATION

I hereby give consent for the following medical care providers to be called:

DOCTOR:	PHONE:
DENTIST:	PHONE:
MEDICAL SPECIALIST:	PHONE:

In the event reasonable attempts to contact my emergency contact and/or me have been unsuccessful, I hereby give my consent for (1) the administration of any medical treatment deemed necessary by above named doctor/dentist/medical specialist, or, in the event the designated practitioner is not available, by another licensed practitioner; and (2) the transfer of myself and/or my child to any hospital reasonably accessible.

This authorization does not cover major surgery unless the medical opinions of two other licensed physicians are obtained prior to the performance of such surgery.

SIGNATURE OF PARENT/GUARDIAN:

DATE:

PART II—REFUSAL TO CONSENT (Do not complete if Part I is completed)

I do not give my consent for emergency medical treatment for my minor child. In the event of illness or injury requiring emergency treatment, I wish the following action to be taken:

SIGNATURE OF PARENT/GUARDIAN:

DATE:

WELCOME to Pizzazz, Baton, Pom & Dance! Listed below are the class recommendations we have chosen for your child for the 2018/2019 Pizzazz season.

Please complete the registration form on the back of this letter thoroughly. We need ALL of the information to register your child. You can mail the form along with your payment to: Pizzazz, 1000 Jaycox Road, Avon, OH 44011 or return it to us at the **Open House on Monday, August 20, 2018 6-8 p.m.** Payment of Session 1 fee and family registration fee is due on or before Open House.

Fall classes will begin the week of September 9, 2018. Class weeks begin on Sunday. Sessions 1-3 are seven (7) week sessions and Session 4 is a ten (10) week session. Please see attached calendar for information on break weeks, tuition due dates, etc. You can also view our class schedule online at www.pizzazzpompom.com under the "SCHEDULE" tab.

DANCE/POM CLASSES: Students who would like to compete with our Dance and Pom Competition Teams will be given the opportunity to try-out for teams during the second session. Competition teams are optional.

BATON PRIVATE LESSONS W/ GRACE AND/OR EILEEN: Please let us know if you are interested in scheduling private lessons with Grace or Eileen. As soon as we know the interest level we will be able to schedule lessons.

Name of Student: _____

CLASS RECOMMENDATIONS

	CLASS	LEVEL / AGE	TEACHER	DAY/TIME	SESSION 1-3 FEE	SESSION 4 FEE
<input type="checkbox"/>	Junior Dance	~Ages 11-14	Doreen	Sunday 1:00-2:00 p.m.	\$130	\$175
<input type="checkbox"/>	Junior/Senior Pom	~Ages 11-18	Doreen	Sunday 2:00-3:30 p.m.	\$150	\$215
<input type="checkbox"/>	Senior Dance	Advanced	Doreen	Sunday 3:30-4:30 p.m.	\$130	\$175
<input type="checkbox"/>	Senior Baton (starts November)		Eileen	Monday 7:30-8:15 p.m.	\$107	\$152
<input type="checkbox"/>	Diamond Pom	~Ages 6-11	Doreen	Wednesday 5:30-6:30 p.m.	\$130	\$175
<input type="checkbox"/>	Elite Dance	~Ages 7-13	Doreen	Wednesday 6:30-7:30 p.m.	\$130	\$175
<input type="checkbox"/>	Sapphire Pom	~Ages 8-13	Doreen	Wednesday 7:30-8:30 p.m.	\$130	\$175
<input type="checkbox"/>	Tiny Tot Baton & Pom	~Ages 3-6	Eileen	Thursday 6:00-6:40 p.m.	\$107	\$152
<input type="checkbox"/>	Gold Baton I	Beginner	Eileen	Thursday 6:45-7:30 p.m.	\$107	\$152
<input type="checkbox"/>	Gold Baton II	Intermediate	Eileen	Thursday 7:30-8:15 p.m.	\$107	\$152
<input type="checkbox"/>	Private Baton Lessons		Eileen/Grace	Scheduled through Doreen		
<input checked="" type="checkbox"/>	ANNUAL REGISTRATION (per family)				+ \$30	
TOTAL DUE AT REGISTRATION:					\$	
Payment can be made by cash, check or credit card or online via your Parent Portal. All checks made payable to Pizzazz						

For Office Use Only

	Amount	Date	Type
<input type="checkbox"/> Tuition & Reg Fee	\$		
<input type="checkbox"/> EMF			