

Ashley Grimes Dance Collective. LLC

13145 Kings Lake Dr Unit 102

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"The Shining Stars" Aftercare Dance Program Registration Form

(Please print)

***Please Return Form to the front desk or email back to**

AshleyGrimesDanceCollective@Gmail,Com to finish registration.

Online Registration/ Payment Portal System coming soon.

How did you hear about the "The Shining Stars" Aftercare Dance Program ?

Did anyone refer you to "The Shining Stars" Aftercare Dance Program?

DANCER NAME :

DOB:

AGE:

GRADE:

PARENT/GUARDIAN(S) NAMES :

PARENT EMAIL:

SECONDARY EMAIL:

PHONE NUMBER HOME:

CELLPHONE :

MOTHER'S EMPLOYER ADDRESS :

FATHER'S EMPLOYER ADDRESS:

HOME ADDRESS:

CHILDS SCHOOL:

MEDICAL/ALLERGY INFO:

EMERGENCY CONTACT NAME:

EMERGENCY CONTACT RELATIONSHIP :

EMERGENCY CONTACT PHONE NUMBER:

PLEASE WRITE THE NAMES OF ANYONE YOU ARE ALLOWING TO PICK YOUR CHILD UP AND SIGN OUT OF AFTERCARE?

***AGD co. uses email as primary source of communication.**

Please add AshleyGrimesDanceCollective@gmail to your email address book to ensure you receive all up dates and communications.

Payment Policies Signature and Waiver

I acknowledge and understand that I am enrolling for a 10 month aftercare program, August through May. I understand there are no refunds. After care is paid monthly. I agree to pay the tuition fee by the 15th of each month and know there is a \$15.00 late fee after the 20th. AGDco. does not mail tuition invoices. I understand that I must pay a \$35.00 insufficient funds fee for all returned checks. I understand there will be costume fees and recital fees for no more then two dances. I understand that if I discontinue mid- season and later register again, I must re-pay a registration fee. I reserve the right to discontinue my payment obligation to Ashley Grimes Dance Collective provided that I notify the office in writing, 30 days prior to previous month.

I Printed Name: _____ Parent of

Signature: _____ Date: _____/_____/_____

I (Name) _____ parent of _____

understand that participating in Dance classes and activities as well as being transported and riding in a vehicle could involve some possible personal injury. By signing this release form I/we (The Dancer/Parent/Guardian) intending to be legally bound , assume all risks and waive , release , and forever discharge all rights and claims for damages arising from the performance and participation at Ashley Grimes Dance Collective LLC. Including any claims for loss, damages, or injury to my child's person or property related to the use of any and all spaces used by Ashley Grimes Dance Collective LLC. I/ we agree to release and hold harmless Ashley Grimes Dance Collective LLC, Ashley Grimes, Angelle Wise , any of it's Teachers, Dancers, Staff Members, and facilities used from any cause of action , claims, or demands now and in the future. I agree Ashley Grimes Dance Collective LLC is not liable for any loss or property damage before, during or after classes. I acknowledge that I knowingly and voluntarily assume full risks for physical injury, death, property loss or damage arising out of participation at Ashley Grimes Dance Collective LLC including classes in studio and also performances/trips located elsewhere _____.

I give permission for my child to be photographed or video taped by AGD co. LLC for promotional purposes _____.

By Initialing this statement _____, I Declare the above stated participant is in good health and is able to participate in strenuous activities such as dance. In the event of an emergency and I am unavailable to authorize a physician to examine, interview, test and if necessary treat my child as they deem advisable. I also certify to the best of my knowledge that my child nor a member of my household has had symptoms or come into contact with or tested positive for COVID-19. In the event my child were to be exposed to or contract COVID-19 I do not hold Ashley Grimes Dance Collective LLC responsible.

I _____ give permission for my child to be transported by vehicle from their school to "Ashley Grimes Dance Collective" by Ashley Grimes or Angelle Wise. If someone other then Ashley Grimes or Angelle Wise on staff will be picking your child up from school AGDco. will notify the parent first and then the school. If an offsite activity is planned , AGDco. will notify and get permission first from the parent in advance.

The Shining Stars Informational Packet :

Payment Policies & Registration information

Welcome to “The Shining Stars” after care dance program! Tuition is paid Monthly. The cost of after care has been calculated by your students release times and student days in the year. For Public schools it is \$375 a month and for Charter Schools it is \$275 a month. All Hillsborough County School non students days have been figured into this price and there will be no after care on these days off. In the event your child is sick or on vacation there is no refunding or discounts for the after care monthly tuition costs. There are no refunds. Tuition is due on the **15th of every month**, there will be a **\$15 late fee** if it is **paid after the 20th**. The late fee is strictly enforced, please make your payments on time. Currently cash, Check to “AGDco.” and Venmo @AGDco are accepted! There is a secure drop box for checks to the left of the studio upon entrance. An online payment portal is being set up and you will be notified by email how to use it once available. There is a one time **Registration Fee** of \$25 per student and \$40 per family. We do offer a 10 percent sibling tuition discount for aftercare!

After Care Policies

The “Shining Stars” After Care Board - The board is located in the middle of the studio on the pink wall. Your child will be on a set schedule with the exception of when offsite activities are planned. They will participate in fun activities like daily dance classes, Arts and Crafts, Games, Movies, Snack and Homework time and more! The weekly schedule will be posted on the board. Everyday your child will check off under their name the accomplishments in the schedule and that everything was done. Upon pick up you will need to sign off on the board under your Childs name. If there are changes to the after care schedule it will be updated on the after care board. Any important information can also be found here.

Absence- Please notify us the morning of if your child is not feeling well or will miss aftercare for any reason.

Sickness- If your child becomes sick during aftercare we will notify you immediately.

School: It is required from most schools that you put “Ashley Grimes Dance Collective” authorized to pick up your child on the car rider form. The registration form will be forwarded to the schools on our ends.

School Pick up/ Studio Release times : We will be waiting to pick up your child from after care in the designated area the school establishes for after care during their release time . Please remind your child to be timely when going to the pickup vehicle as sometimes other school are scheduled for pick up after . Unfortunately, We will not be able to wait any longer then 10 minutes as it will disrupt the schedule . Please be prompt when picking up your child at 5:30PM when the aftercare program ends. If you need additional care past 5:30PM please ask us! Something can be worked out for a small additional charge. Any Fall/Spring Schedule classes may be registered for at a discounted price if you are apart of “The Shining Stars”. Please inquire for more information.

What will your child need to bring and wear ?

Food: Your child will need to bring their own snack. There is a refrigerator and microwave provided. There are two water fountains for use at the studio.

Clothes: Pink Ballet shoes, Pink Tights, Black leotard, Black Tap Shoes, Street shoes, Athletic wear (Leggings, dance shorts, t-shirt any color)
Hair pulled back, we will assist them get ready. Please pack the necessary hair supplies.

Where does Your child put their stuff?

Cubbies: Your child will receive their own personal cubby with their name on it. They can store their belongings in it!

Electronics Policy: Your child will have to ask permission to use their electronics. Please let us know if you would like your Childs tablets and phones kept at the desk and released upon sign out.

Will my child be in the Annual Recital!

Yes! They will be in the annual “Ashley Grimes Dance Collective” Recital! They will be in no more then two recital routines. An informational packet about recital with the dates and fees will go out in September. Recital is highly encouraged but not mandatory. After school ends there will be one rehearsal a week set up and scheduled for participating members before the recital! More information will go out about this!

More Fun News!

Show off your “Shining Stars” pride in our new T- Shirts coming soon!
They will be sold at the front desk!