



**CREATIVE SOULS DANCE COMPANY**

**REGISTRATION FORM 2025-2026**

**STUDENT(S) ENROLLING:**

1. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex: \_\_\_\_\_ Grade: \_\_\_\_\_

Classes registering for: \_\_\_\_\_

\_\_\_\_\_

\*\*Any Medical Condition: \_\_\_\_\_

2. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex: \_\_\_\_\_ Grade: \_\_\_\_\_

Classes registering for: \_\_\_\_\_

\_\_\_\_\_

\*\*Any Medical Condition: \_\_\_\_\_

3. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex: \_\_\_\_\_ Grade: \_\_\_\_\_

Classes registering for: \_\_\_\_\_

\_\_\_\_\_

\*\*Any Medical Condition: \_\_\_\_\_

**STUDENT/PARENT/GUARDIAN INFORMATION: (Please print neatly)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Cell): \_\_\_\_\_ Phone (Work): \_\_\_\_\_

Email: \_\_\_\_\_

\*\*Alternate Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

***\*\*Office use only – Please do not fill out this box\*\****

**Promotional/Family Discount:** \_\_\_\_\_ % **Type of discount:** \_\_\_\_\_

**Registration Fee:** \_\_\_\_\_ **Prorated Tuition:** \_\_\_\_\_



I understand that tuition must be paid in monthly instalments due the 1<sup>st</sup> of each month. Tuition is charged by automatic withdrawal from my credit card stated below. I authorize Creative Souls Dance LLC to debit my account every calendar month until I finish the season or discontinue my classes (30 days' notice required). (Visa, Mater Card or Discover)

\_\_\_\_\_  
Parent or Student Signature (if student is over 18 yrs)

\_\_\_\_\_  
Date

**BILLING INFORMATION: (Please print neatly)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Cell): \_\_\_\_\_ Phone (Work): \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp date: \_\_\_\_\_ CVS Code: \_\_\_\_\_

**PLEASE READ AND INITIAL:**

\_\_\_\_\_ I acknowledge to have read the terms of this agreement in its entirety. I understand that under the terms of this agreement, the Dance Studio obligates itself to furnish the student with competent instruction and suitable facilities for teaching lessons. All class sessions are supervised by qualified personnel trained in the procedures and traditions of dance instruction.

\_\_\_\_\_ Student(s) hereby represent that he/she is physically able to take the prescribed course of instruction. I recognize that participation requires physical exertion that may be strenuous at times and may cause physical injury and I am fully aware of the risks and hazards involved. I understand that it is my responsibility to consult with a physician prior to and regarding participation.

\_\_\_\_\_ I understand that the tuition fees are to be paid in the specific installments based on the dancer's registration of total classes and is not affected by lesson schedule and/or attendance. Payment for each class, workshop, and private lesson are due and payable prior to each scheduled class, workshop, and private lesson. You/Your child may not attend class until payment is received.

\_\_\_\_\_ I understand that I am to keep a valid credit card on file in my account at all times, available for the automated withdrawals.

\_\_\_\_\_ **Payments are due on the 1<sup>st</sup> of the month.** You agree that your monthly packages are calculated on an annual/session basis and will stay the same as some months have more classes than others, along with School Breaks, Holidays and Closings. Credit Cards declined will be charged a \$10.00 late fee if other payment is not received same day.

\_\_\_\_\_ I agree to pay the facility for instructional services rendered and fees associated, payable in installations as agreed. I understand that my account will be debited on the day and in the amount agreed to with the Studio. A \$15.00 late charge will be assessed for any accounts that are 10 days past due.

\_\_\_\_\_ I understand that the tuition in this agreement is monthly tuition. Recital fees, costumes, tickets, photography packages, videos, performance fees, competition fees, etc. are NOT included in tuition.



\_\_\_\_\_ All cancellations and moving of appointments/lessons are to be communicated in writing to Creative Souls Dance LLC at least 24 hours prior to the scheduled time. There are no refunds or credits for missed classes or private lessons. Classes and lessons may be made up in cases of illness or emergencies only and must be taken within 30 days of absence. Please schedule make-up classes and lessons at the office.

\_\_\_\_\_ I understand that 30-day notice is required should we decide to cancel our student(s) enrollment. One-month notice from the FIRST DAY of the month is required to discontinue any classes. IF NOTICE TO DISCONTINUE CLASSES IS GIVEN AFTER THE FIRST DAY OF THE MONTH, YOUR CREDIT CARD WILL BE CHARGED FOR THE CLASS(ES) THE FOLLOWING MONTH AND WILL BE YOUR FINAL PAYMENT. Withdrawal must be done in writing and dropped off to the studio, or by email, and will not be accepted over the phone. I understand that I/we are responsible to pay for any fees that have been assessed prior to cancellation of enrollment.

\_\_\_\_\_ I acknowledge that Creative Souls Dance LLC is not responsible for any injuries a pupil may receive while on the premises. Each student assumes the risk involved in participating in any dance related classes or performances. I release the school, its staff members, and any fellow students from any liabilities resulting from any personal injury and/or loss of personal property. I hereby agree to all the terms and conditions of the liability waiver.

\_\_\_\_\_ I will faithfully comply with all rules and regulations of Creative Souls Dance LLC. I further understand that failure to complete lessons/classes does not relieve me of my obligation to pay the tuition in full. I also agree that no tuition will be returned to a student for any reason.

\_\_\_\_\_ I understand that it is my responsibility to stay up to date on studio information through email, group text messages, social media, and paper announcements. Throughout the year, Creative Souls Dance LLC will send important information regarding performances, events, parent updates, etc. I also understand that it's my responsibility to inform the Studio of any address or telephone number change.

\_\_\_\_\_ To avoid student distraction, I understand that parents do not enter the studio while class is in session.

\_\_\_\_\_ For the safety of all students, I understand that it's best for everyone to drop off and pick up on time. Creative Souls Dance LLC are unable to watch the students while other classes and lessons are going on. Students are requested to check outside for their ride when class is over. If I am late, I understand that I will need to park and walk into the studio to get them. Creative Souls Dance LLC are not responsible for providing before or after class care for students. Students are not to be left at the studio for excessive time before, during or after class.

\_\_\_\_\_ All parents and students will always conduct themselves in the utmost appropriate manner, including performances and events outside of the Studio, representing Creative Souls Dance LLC. We reserve the right to forfeit this agreement and to remove a student from our studio for any actions we deem as misconduct and/or inappropriate by the student, family member, or friend of the student.

\_\_\_\_\_ There are no refunds at any time, including missed classes for personal reasons, inclement weather or acts of God. I understand that if Palm Beach County Schools are closed due to inclement weather, all classes will be canceled for that day as well. However, your account may be frozen due to a doctor documented medical excuse. These will be dealt with on an individual basis and are at the discretion of the executive Director.

\_\_\_\_\_ Creative Souls Dance LLC will be videotaping and/or taking photographs of our students in class, special events and performances. I give the Studio permission to use these photographs and videos for publicity purposes.



## **LIABILITY RELEASE AGREEMENT**

1. I understand and agree that in participating in the activity of any class, lessons, workshop, rehearsal or performance (the "Activity"), there is a possibility of physical injury and, in rare circumstances, death. I agree to release and hold harmless both ***Rosalie Galante*** and ***Creative Souls Dance LLC***, including its owners, officers, directors, teachers, dancers, staff members, and facilities from any cause of action, claims, or demands now and in the future. I will not hold ***Rosalie Galante*** and ***Creative Souls Dance LLC*** liable for any personal injury or any personal property damage, which may occur on the premises before, during or after classes. Furthermore, I understand that I should be aware of my physical limitations and agree not to exceed them. Further, I authorize and agree that ***Rosalie Galante*** and/or ***Creative Souls Dance LLC*** may take and use photographs/videos of me for purposes of record keeping, advertising, and marketing. I understand that I do not have any rights to these photographs/videos and will not be compensated for the same.
2. **ASSUMPTION OF THE RISKS AND RELEASE.** I recognize that there are certain inherent risks associated with the above described Activity and I assume full responsibility for personal injury to myself and (if applicable) my family members, and further release and discharge ***Rosalie Galante*** and ***Creative Souls Dance LLC*** including its owners, officers, directors, teachers, dancers, staff members, and facilities for injury, loss or damage arising out of my or my family's participation in the Activity, whether caused by the fault of myself, my family, ***Rosalie Galante*** and ***Creative Souls Dance LLC*** including its owners, member, officers, managers, directors, teachers, dancers, staff members, and facilities, or other third parties. **COVID-19:** An inherent risk of exposure to COVID-19 exists in any public place where people are present. COVID-19 is an extremely contagious disease that can lead to severe illness and death. According to the Centers for Disease Control and Prevention, senior citizens and other people with underlying medical conditions are especially vulnerable. By participating in any Activity organized by ***Creative Souls Dance LLC*** and/or ***Rosalie Galante***, I voluntarily assume all risks related to exposure to COVID-19. To the extent that statute or case law does not prohibit releases for ordinary negligence, this release is also for such negligence on the part of ***Rosalie Galante*** and ***Creative Souls Dance LLC***, including its owners, officers, directors, teachers, dancers, staff members.
3. **INDEMNIFICATION.** I agree to indemnify and defend ***Rosalie Galante*** and ***Creative Souls Dance LLC*** including its owners, officers, directors, teachers, dancers, staff members, and facilities, against all claims, causes of action, damages, judgements, costs or expenses, including attorney fees and other litigation costs, which may in any way arise from my or my family's participation in the Activity.
4. **FEES.** In the event that any damage to equipment or facilities occurs as a result of my or my family's willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs and fees associated with any such actions of neglect or recklessness.
5. **APPLICABLE LAW.** I agree that this Release shall be governed for all purposes by Florida law, without regard to any conflict of law principles. This Release supersedes any and all previous oral or written promises or other agreements.
6. **NO DURESS.** I agree and acknowledge that I am under no pressure or duress to sign this Agreement and that I have been given a reasonable opportunity to review it before signing. I further agree and acknowledge that I am free to have my own legal counsel review this Agreement if I so desire. I further agree and acknowledge that ***Rosalie Galante*** and ***Creative Souls Dance LLC***, have offered to refund any fees I have paid to participate in the Activity if I choose not to sign this Agreement.
7. **ARM'S LENGTH AGREEMENT.** This Agreement and each of its terms are the product of an arm's length negotiation between the Parties. In the event any ambiguity is found to exist in the interpretation of this Agreement, or any of its provisions, the Parties, and each of them, explicitly reject the application of any legal or equitable rule of interpretation which would lead to a construction either "for" or "against" a particular party based upon their status as the drafter of a specific term, language, or provision giving rise to such ambiguity.
8. **ENFORCEABILITY.** The invalidity or unenforceability of any provision of this Agreement, whether standing alone or as applied to a particular occurrence or circumstance, shall not affect the validity or enforceability of any other provision of this Agreement or of any other applications of such provision, as the case may be, and such invalid or unenforceable provision shall be deemed not to be a part of this Agreement.
9. **DISPUTE RESOLUTION.** The Parties will attempt to resolve any dispute arising out of or relating to this Agreement through friendly negotiations amongst the Parties. If the matter is not resolved by negotiation, the Parties will resolve the dispute using the below Alternative Dispute Resolution (ADR) procedure. Any controversies or disputes arising out



of or relating to this Agreement will be submitted to mediation in accordance with any statutory rules of mediation. If mediation does not successfully resolve the dispute, then the Parties may proceed to seek an alternative form of resolution in accordance with any other rights and remedies afforded to them by law.

**I HAVE READ THIS DOCUMENT AND UNDERSTAND IT. I FURHTER UNDERSTAND THAT BY SIGNING THIS RELEASE, I VOLUNTARILY SURRENDER CERTAIN LEGAL RIGHTS.**

**THIS WAIVER AND RELEASE OF LIABILITY SHALL REMAIN IN EFFECT FOR THE DURATION OF MY PARTICIPATION IN THE ACTIVITY, DURING THIS INITIAL AND ALL SUBSEQUENT EVENTS OF PARTICIPATION.**

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**Parent or Student Signature (if student is over 18 yrs)**

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**Date**

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**Parent or Student Print Name (if student is over 18 yrs)**



## RECITAL FEES AGREEMENT 2025–2026

Please read the following information regarding our annual performance. These are important dates, so be sure to mark them on your calendar. **The tentative Dance Recital date is Sunday, May 31, 2026, or June 7, 2026.**

### PLEASE READ AND INITIAL:

\_\_\_\_\_ Recital deposits will be automatically charged to the card on file for you/your student as of **01/01/2026**. Your recital deposit is **50% of the total recital fee**. Payments toward recital fees can be made at any time once the season starts. Any deposits accepted after **01/01/2026** will include a **\$15.00 late fee**.

\_\_\_\_\_ If you/your student will **not** be participating in the performance, please notify the front desk before **01/01/2026** to ensure you are not charged.

\_\_\_\_\_ All **remaining recital fee balances** will be automatically charged on **03/01/2026**.

\_\_\_\_\_ There will be **NO refunds** at any time on money paid toward recital fees.

\_\_\_\_\_ Measurements for costumes will be taken throughout the month of **January**. Please ensure your child is in class to be measured.

\_\_\_\_\_ The recital will be **professionally recorded**, and a copy of the full performance will be available to all interested families at a **small rate of \$20**.

### RECITAL PACKAGE:

This season, we are offering an all-inclusive recital package for each participating dancer.

\_\_\_\_\_ **Gold Package – \$175.00**

Includes:

- 1 Costume with accessories and 1 pair of tights (if required for costume)  
*(If your child is in multiple performances, there will be a separate charge for additional costumes and accessories.)*
- Recital T-Shirt
- Participation Medal/Trophy
- Printed Class Picture
- Recital Program
- Participation in all dress rehearsals and the recital in a professional theater

I have read and understand all the above information regarding this year's recital fees and costume purchase details.

\_\_\_\_\_  
Parent or Student Signature (if student is over 18)

\_\_\_\_\_  
Date

Please note that **NO costume will be ordered without the deposit having been paid. No exceptions.**  
A recital packet will be sent out in **March** with detailed information about rehearsal dates, pictures, performance times and location, ticket information, and volunteer opportunities.