

**REGISTRATION FORM**  
**STUDIO MC PERFORMING ARTS CENTRE**  
2239 MARKET STREET, WHEELING, WV 26003  
2018-2019 DANCE SEASON

**PLEASE PRINT NEATLY!**

NAME \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE(PARENT/GUARDIAN) \_\_\_\_\_ ADDITIONAL # \_\_\_\_\_

STUDENT'S CELL # \_\_\_\_\_

PARENTS NAME (FIRST & LAST) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**PLEASE CIRCLE CLASSES ENROLLING IN (IF PRIVATE, SEMI PRIVATE OR TRIO PLEASE FILL IN CLASS TYPE)**

**TAP(3+)      JAZZ(3+)      BALLET(3+)      POINTE(8+)      LYRICAL(5+)      GYMNASTICS(3+)**

**HIP HOP(3+)      TINY TUMBLERS(18MO-2)      TINY TAP(18MO-2)      MOMMY&ME(15MO-18MO)**

**CHEERING(5+)      PRE-TECH(5-6)      TECH(6+)      TECH&POINTE(8+)      TURNS,LEAPS&JUMPS(10+)**

**PRIVATE \_\_\_\_\_ SEMI PRIVATE \_\_\_\_\_ TRIO \_\_\_\_\_ LIST PARTNER(S) \_\_\_\_\_**

**CLASS DAY AND TIME PREFERRED \_\_\_\_\_**

MEDICAL INFORMATION FORM

List Any Problems:

Bones & Joints \_\_\_\_\_

Muscles \_\_\_\_\_

Ears/Eyes \_\_\_\_\_

Other \_\_\_\_\_ Chronic Ailments \_\_\_\_\_

Asthma \_\_\_\_\_ Other Respiratory \_\_\_\_\_

Heart \_\_\_\_\_ Circulatory \_\_\_\_\_

Diabetes \_\_\_\_\_ Tetanus Shots \_\_\_\_\_

Hypoglycemia \_\_\_\_\_ Epilepsy \_\_\_\_\_

Hemophilia \_\_\_\_\_

List Allergies To Medications, Shots, Etc.

Preferred Physician \_\_\_\_\_

Phone \_\_\_\_\_

Preferred Hospital \_\_\_\_\_

Guardian Or Next of Kin other than parent:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to student \_\_\_\_\_

**State of WV County of Ohio Release Form**

I (We) the undersigned student, parent, or legal guardian of a student of Studio MC Performing Arts Centre for in consideration of my enrollment to the enrollment of my child or a student for whom I have been granted legal custody I voluntarily and knowingly execute this release with the expressed intention affecting the extinguishment of and complete release from any and all claims, actions, demands or rights to monetary judgment arising from any and all injuries or physical harm which may arise from or be sustained as a result of my participation or the participation of my child and/or legal ward deriving from physical activity associated with the study of Dance, Gymnastics or Cheerleading and related activities conducted by the Studio MC Performing Arts Centre, LLC.

EXECUTED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

STUDENT ENROLLED (PLEASE PRINT)

PARENT OR LEGAL GUARDIAN (PLEASE SIGN)

# STUDIO MC PERFORMING ARTS CENTRE PRICE LIST INCLUDING TAX

	PER MONTH
<b>TECH</b>	<b>\$101.65</b>
<b>TECH + PRIVATE</b>	<b>\$174.41</b>
<b>TECH + SEMI</b>	<b>\$165.85</b>
<b>TECH + TRIO</b>	<b>\$157.29</b>
<b>TECH + POINTE</b>	<b>\$128.40</b>
<b>TECH + POINTE + PRIVATE</b>	<b>\$201.16</b>
<b>TECH + POINTE + SEMI</b>	<b>\$192.60</b>
<b>TECH + TRIO + POINTE</b>	<b>\$184.04</b>

## **REGULAR CLASSES**

<b>1 DANCE CLASS</b>	<b>\$26.75</b>
<b>2 DANCE CLASSES</b>	<b>\$53.50</b>
<b>3 DANCE CLASSES</b>	<b>\$80.25</b>
<b>GYM/ACRO CLASS</b>	<b>\$42.80</b>
<b>TINY TUMBLERS/MOMMY&amp;ME - 30 MIN.</b>	<b>\$26.75</b>
<b>GYM + 1 CLASS</b>	<b>\$69.55</b>
<b>GYM + 2 CLASSES</b>	<b>\$96.30</b>
<b>GYM + 3 CLASSES (4TH IS FREE)</b>	<b>\$96.30</b>
<b>PRIVATE CLASS</b>	<b>\$72.76</b>
<b>SEMI PRIVATE CLASS</b>	<b>\$64.20</b>
<b>TRIO CLASS</b>	<b>\$55.64</b>
<b>PRE TECH (5 - 6YRS)</b>	<b>\$90.95</b>