



# Ovations DANCE STUDIO

Phone: 856-833-0022  
Fax: 856-833-0021  
Web: OvationsDanceStudios.com

## Ovations Dance Contract

You, the customer, are entitled to a copy of this agreement at the time you sign it.

### 2010 Summer Dance Session

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

First Name(s): \_\_\_\_\_

#### PAYMENT POLICIES

- **Payment Terms:** It is the customer's obligation to know and understand Ovations Dance Studio's payment terms at the time of enrollment for each class/session.
- **Payment Period:** Payment for the summer session is due prior to the start of the session
- **Returned Checks:** There is a \$25 fee on all returned checks.
- **Drop-out Policy:** In the event that a dancer decides not to continue in any class, you will be held responsible for contacting the office to notify Ovations of the change in enrollment. There is no refund for the summer program. In the event that a student misses three or more consecutive classes, Ovations Dance Studio reserves the right to fill that dance spot without refund.
- **Outstanding Balances:** Any outstanding balances are subject to being reported to a collection agency.
- **Default:** Should there be a default made on any payment, the student will not be permitted to participate in class activities nor enter the class environment.
- **Refunds:**

**There are no refunds.**

#### SAFETY POLICIES

- You must use street parking on Haddon Avenue.  
**DO NOT PARK IN THE PARKING LOT!**
- This lot is shared with Subway and only the Staff of Ovations Dance Studio is permitted to park in the designated spots.
- As soon as your child is with the instructor, you are free to leave or you may wait in the waiting room. We do ask that young children be picked up in the lobby. Older students are permitted to wait INSIDE by the door to watch for their ride. Please use the closest cross walk when crossing Haddon Ave. (Albertson Ave.)
- Please do not let siblings play in empty classrooms.
- No one may go on any tumbling equipment without the instructor's permission and presence.
- **Medical Limitations:** The office must be made aware in writing if your child has any special needs or conditions including medications, allergies, or asthma.
- **Dress Code:** The regulations of proper classroom attire have been read and are understood.  
(available online)  
**DO NOT PARK IN THE PARKING LOT!**

I have read and understand the Safety and Payment Policies of *Ovations Dance Studio* and agree to abide by them. I also understand that it is my responsibility to make my child(ren) aware of these Policies as well.

#### Waiver, release of liability and hold harmless agreement

I agree to hold *Ovations Dance Studio, LLC*, its members, officers, owners, agents, employees and assignees, harmless and to indemnify them from any claims, demands, injuries, damages, actions, lawsuits, legal fees and costs arising from any injury to person or property from the use of services, facilities, and premises of the Club including any off sight activities.

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_