

Michele Compa Dance and Exercise Center

Michele Compa, Director

www.michelecompa.com

(718)-549-9635

Fall and Winter Fees (2015-16)

1st Semester:

Wednesday, September 16th - Sunday, January 31st

2nd Semester

Monday, February 1st - Sunday, June 11th

Children's Sessions & Fees

Registration/Insurance Fee - \$30 per child or \$40 per family

Per-Semester Payment

1 class per week \$335.00

2 classes per week \$630.00

3 classes per week \$890.00

4 classes per week \$1,115.00

Two Payment Plan (2nd payments due 11/1 for the 1st semester and 4/1 for the 2nd)

1 class per week \$175.00

2 classes per week \$320.00

3 classes per week \$450.00

4 classes per week \$560.00

Two trial classes (applicable to tuition) \$40.00

Private Classes

\$70.00/hour

\$60.00/45 min.

\$50.00 30 min.

Late fee (more than 10 days late) \$10

Adult Session (Includes Yoga, Low Impact Aerobics, Stretch and Tone and Pilates)

Single class \$19.00

Ten class card \$165.00

Twenty class card \$300.00

**Both 10 and 20 class cards are valid for 11 weeks only*

Adult Dance Classes

Ten class session \$175.00

Tumbling or Dance Birthday Parties

One hour and 30 minute party. All party bookings Saturday afternoon or Sunday morning or afternoon.

Fees: \$300.00 (Includes 20 children)

\$10.00 per additional child

Ballroom Dance Packages for Special Occasions (Weddings, Sweet 16, Bat Mitzvah, Bar Mitzvah, etc.)

5 one hour classes \$325.00

10 one hour classes \$550.00

Recital and Observation Class

Observation classes will take place the last week of the 1st semester during class time. A final recital will be performed Sunday, June 12th. Participations in the recital is strictly voluntary. The recital fees are approximately \$165-\$175 and includes a costume, 4 complimentary tickets and rehearsal fees. Students are expected to attend any and all rehearsals and dress rehearsals as it pertains to the recital.

Studio Policy

There will be a \$10 late fee applied to all late payments as well as a \$30 bounced check fee will be applied to an transactions where a check has been bounced. This policy is non-negotiable.

Holiday Closings

Yom Kippur - Wednesday, Sept. 23rd

Columbus Day - Monday, Oct. 12th

Thanksgiving - Thursday, Nov. 26th - Saturday, Nov. 28th

Winter Break - Tuesday, Dec. 22nd - Saturday, Jan. 2nd

Martin Luther King Jr. Day - Monday, Jan. 18th

Presidents Week - Saturday, Feb. 13th - Friday, Feb. 19th

Good Friday - Friday, March 25th

Spring Break - Saturday, April 23rd - Friday, April 29th

Memorial Day - Monday, May 30th

Registration Form and Fitness Agreement

Print Name (Student) _____

Parent Name _____

Address _____ Apt. _____

City _____ State _____ Zip code _____

Home Phone _____ Business _____

Cell _____ E-mail _____

Class(es) Desired _____

Warranty of Fitness and Agreement to Limitation of Liability

I hereby certify that I am physically capable of participating in this exercise program designed by Michele Compa Dance and Exercise Center. I have no physical disability, impairment, or ailment that would prevent me from engaging in such active or passive dance exercise programs; nor do I have any physical conditions which should detrimentally aggravate.

Furthermore, I agree that I shall participate in classes and use the facilities entirely at my own risk and agree not to hold Michele Compa or any of her employees liable for any injury or damage which may occur to me in the above said class.

I also understand that classes paid for must be taken within the session period. Class monies may not be credited toward future sessions. There are no refunds without an authorized medical excuse.

Signature _____ Date _____

Photo/Video Release Form

AUTHORIZATION TO USE PHOTOGRAPHS AND/OR AUDIO-VISUAL FOOTAGE

I, _____, hereby authorize Michele Compa Dance and Exercise Center to use, reproduce, and/or publish photographs and/or video footage that may pertain to me (and/or my child) captured during studio classes, rehearsals, recitals/productions, or other related activities - including my image, likeness and/or voice without compensation. I understand that this material may be used in various publications, recruitment materials, advertisement, the Michele Compa Dance and Exercise Center website, or other related endeavors. This authorization is continuous and may only be withdrawn by my specific recession of this authorization. Consequently, Michele Compa Dance and Exercise Center may publish materials, use my name, photograph, and/or make reference to me in any manner that Ms. Compa deems appropriate for promotion and/or publicity purposes.

Signature _____ Date _____

Parent/Guardian _____ Date _____
(if student is under 18)