



Term 4
2019

REGISTRATION FORM
14th Oct – 13th Dec

Dancers Name:		Age:
Postal Address:		Email: <i>(Important)</i>
Phone number- Home: ()		Mobile Number: <i>(Important)</i>

CLASS TYPE: *(please CIRCLE appropriate box)*

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
3:30pm	Mini Peeps 1 Pre School 3-5 yrs 3:30-4:00pm With ABBEY \$75				PHUNKY FEET 3 Kidz 5-6 Yrs 3:30-4:30pm With CAITLIN \$125
4:00pm	PHUNKY FEET 1 Kidz 5-6 Yrs 4:00-5:00pm With AMBER-LEE \$125	PHUNKY FEET 2 Kidz 5-6yrs 4:00-5:00pm With SHANNON \$125	Dudez Boyz Only 8-12 yrs 4:00-5:00pm With BEN \$125	ELITE JUNIOR KIDZ 8-10YRS (AUDITIONS ONLY) 3:30-5:30pm With JORDAN \$230	Mini Peeps 4 Pre School 3-5 years 4:30-5:00pm With CAITLIN \$75
4:30pm	Stylee STEPS 1 Kidz 7-9 yrs 5:00-6:00pm With AMBER-LEE \$125	Stylee STEPS 2 Kidz 7-9 years 5:00-6:00pm With SHANNON \$125	STREET BOPS 2 Kidz 10-12 yrs 5:00-6:00pm with BEN \$125		Stylee 3 STEPS Kidz 7-9 yrs 5:00-6:00pm With CAITLIN \$125
5:00pm	BEAT SQUAD 1 Teenz 13-18 yrs 6:00-7:00pm With DEADRE \$125	STREET BOPS 1 Kidz 10-12 yrs 6:00-7:00pm with AMBER-LEE \$125	PRODIGIES Elite Kidz Development Crew (AUDITIONS ONLY) 6:00-7:15pm With LATESHA \$145	ELITE JUNIOR KIDZ 10-12YRS (AUDITIONS ONLY) 5:30-7:30pm With JORDAN \$230	ASAP ELITE TEENZ (AUDITIONS ONLY) 6:00-8:00pm With MARQUISE \$230
6:00pm		Urban Troop Adult Ladiez 18+ 7:00-8:00pm With DEADRE \$125	BEAT SQUAD 2 Teenz 13-18 yrs 7:15-8:15pm With BEN \$125		ELITE ADULTZ 18+ (AUDITIONS ONLY) 7:30-9:30pm With JORDAN \$230
7:00pm	ELITE TEENZ (AUDITIONS ONLY) 7:00-9:00pm With MARQUISE \$230				
7:30pm					
9:00pm					

NOTE: All classes apart from Waiuku held at the Groovit Dance Studio - 6A Crosbie Rd, Pukekohe
Waiuku classes held at - St John's Hall, Constable Road, Waiuku

NOTE: All class prices on this timetable have had the 20% prompt payment taken off. All fees must be paid by the 8th of November in order to receive this discount.

We have a two week "No Obligation" policy, where new dancers can register at the start of a term to give it a go. After this time dancers will be charged for the full term. Everyone must register, even if you are just having a go. We often have a waiting list, so please inform groovit by the end of Week 2 if a dancer is not returning. Once a dancer has registered & paid fees, there are **NO REFUNDS** given to dancers who change their mind or miss lessons.

NOTE: In order to receive the '20% Prompt Payment Discount' all fees must be paid in full by the end of Week 4 classes, 8th of November. If fees are outstanding any debt recovery charges incurred will be payable by the Debtor.

Please tick this box if you would prefer that you or your dancers photo or video was **NOT** used on GROOVIT's Facebook page or any other form of advertising

PAYMENT

<input type="checkbox"/> DIRECT CREDIT	<input type="checkbox"/> CHEQUE Made Payable to Groovit	<input type="checkbox"/> CASH	AMOUNT PAID \$	Date Paid
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Direct Credit Details: Groovit ASB 12-3052-0012963-00
Particulars: Account holders name Code: Dancers Name Reference: Class name

By signing this form I accept full responsibility for any injury or sickness that may occur while participating in classes and agree that 'groovit' and/or its instructors are not liable financially or otherwise. I have read and filled out the above form with accuracy and honesty.

I have made the instructor aware of any serious conditions or illnesses and have completed a 2019 Health & Medical Form

All Choreography, Dance Routines, CD's and Music Mixes are the intellectual property of Groovit and are not for public use. CD's are for home use.

Parents Name:

Dancers or Parents Signature:

Date:

PTO



HEALTH & MEDICAL FORM 2019

(NOTE: This form only needs to be filled out once a year, unless changes need to be made)

Dancers Name:	Age:
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Do you suffer from any of the following:

Asthma:

Diabetes:

Epilepsy:

Do you have any other medical condition that may affect your ability to exercise?

YES

NO

If yes please describe below:

Have you had any injuries, pains or procedures that may affect your ability to exercise?

(I.e. Sprains, brakes, dislocations, cuts, operations etc.)?

YES

NO

If yes please describe below:

Where? (I.e. left ankle, right shoulder etc.)

Emergency contact name:	Contact Phone Number:
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Signed:	Date:
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If under the age of 18 years old a parent or guardian must sign this form on your behalf.

By signing this form, I (signatory) accept full responsibility for any injury or sickness that may occur while participating in classes and agree that 'groovit' and/or its instructors/choreographers are not liable financially or otherwise.

I have read and filled out the above form with accuracy and honesty.

I have made groovit aware of any serious conditions, pains or any other type of injuries that may affect my ability to dance.

All the information that has been obtained on this form will remain confidential.