DEBBIE'S DANCE COMPANY 11570 San Jose Blvd., Suite 10 Jacksonville, FL 32223 904/268-1410 www.debbiesdanceco.com

The staff at Debbie's Dance Company is very excited to begin classes during Extended Day at Liberty Pines. <u>CLASSES WILL BEGIN WEDNESDAY September 8,2021.</u> We will be offering classes in Jazz/Hip-Hop on Wednesdays @ 2:00 pm and Ballet Wednesdays @ 3:00 pm also Acrobatics Friday @ 3:00 and Cheerleading Fridays @4:00.

Class fees are \$12.00 per class. Classes will continue all year with a payment of due every 11 weeks. All Payments can be turned into the Dance Teacher or for your convenience we also accept debit and credit cards on our website by clicking the make a payment widget or call us with your credit card information between 5-8pm

PAYMENT SCHEDULE: (WEDNESDAY CLASSES)

\$132.00 DUE 9/8: FOR 9/8, 9/15, 9/22, 9/29, 10/6, 10/13, 10/20, 10/27, 11/3, 11/10, 11/17 \$132.00 DUE 12/1: FOR 12/1, 12/8, 12/15, 1/12, 1/19, 1/26, 2/2, 2/9, 2/16, 2/23, 3/2 \$132 DUE 3/9: FOR 3/9, 3/23, 3/30, 4/6, 4/13, 4/20, 4/27, 5/4, 5/11, 5/18, 5/25

PAYMENT SCHEDULE (FRIDAY CLASSES)

\$132.00 DUE 9/10 FOR: 9/10, 9/17, 9/24, 10/1, 10/8, 10/15, 10/22, 10/29, 11/5, 11/12, 11/19 \$132.00 DUE 12/3 FOR: 12/3, 12/10, 12/17, 1/7, 1/14, 1/21, 1/28, 2/4, 2/11, 2/18, 2/25 \$120.00 DUE 3/4 FOR: 3/4, 3/25, 4/1, 4/8, 4/22, 4/29, 5/6, 5/13, 5/20, 5/27

If your child is not registered for extended day there is a \$25.00 registration fee due: Payable to extended day. Please pay this fee when you register for dance.

Please complete the bottom of this form e-mail it to <u>Dancedeb1@aol.com</u> BEFORE MONDAY 9/6, 2021 Child's Name: Birthdate:

Grade:	_Extended Day?	Paren	ts' Name:		_
Address:			CITY/ZIP:		
Home Phone: _	Cell Pho	ne:			
Email:				r	
	Please	sign me	up for: (circle classe	s)	
Jazz/	′Нір-Нор В	allet	Cheerleading	Acrobatics	

RELEASE WAIVER AND ASSUMPTON RISK: I HEREBY WAIVE ANY AND ALL RIGHTS FOR DAMAGES THAT I OR MY CHILD MAY HAVE AGAINST Debbie's Dance Company or its employees, or for injuries that my child may sustain while participating in any class at St. Johns County Schools. I further attest that my child is in good health, and is physically fit for the activities we are registered for. By signing below I acknowledge that I have read, understood and accept this Release Waiver and Assumption of Risk