



**ILTA DANCE STUDIO, INC.**  
**2025 -2026 REGISTRATION FORM**

Framingham Location

Child's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Telephone(Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Emergency) \_\_\_\_\_

Parent(s) Names \_\_\_\_\_

E-mail address \_\_\_\_\_

Please register my child for the following class (Please see schedule for class times and days) Age Group: \_\_\_\_\_ Day(s): \_\_\_\_\_

Please make checks payable to **ILTA DANCE STUDIO, INC.**

**A non-refundable \$50.00 Registration Fee will be applied to all applicants and must be received by June 30, 2025. After the deadline, the Registration Fee will be \$100.00.**

**Fee Schedule: OPTION ONE: 2 checks dated 09/01/25 - for 5 months and 2/1/26 - for 5 months – to be submitted with registration form.**

**OPTION TWO: 10 checks dated 09/01/2025, 10/01/2025, 11/01/2025, 12/01/2025, 01/01/2026, 02/01/2026, 03/01/2026, 04/01/2026, 05/01/26, 06/01/26. Checks will be presented for payment on the 1<sup>st</sup> day of the corresponding month.**

**\$25.00 Fee will be charged for returned checks and \$25.00 Fee will be charged for late payments.**

- ◆ It will be no refunds, or credits for missed group lessons. Students may make up a maximum of 1 lesson per month in a similar class.
- ◆ Group lessons monthly tuition is refundable with two-week cancellation notice.
- ◆ No refunds will be issued on the Private lessons' packages.
- ◆ The studio will be closed for
  - Labor Day (9/1/25),
  - Yom Kippur (10/01/25-10/02/25),
  - Thanksgiving weekend (11/27/25-11/30/25),
  - Winter Vacation (12/24/25-01/04/26),
  - April Vacation (4/20/26-4/24/26),
  - Memorial Day (5/25/26).
- ◆ In case of snow emergency, it will be no make up classes
- ◆ We reserve the right to display any team and/or individual photographs.
- ◆ Parents are NOT allowed in the classroom during group and private lessons, there will be an Open Lesson Week scheduled per further notice.
- ◆ ILTA DANCE STUDIO is not responsible for the children not being picked up by the parents after the lesson and lost items.

**TO AVOID BEING CHARGED FOR THE PRIVATE LESSON, PLEASE CALL 24 HOURS IN ADVANCE.**

## CHILDREN AND YOUTH (UNDER 18 YEARS OF AGE) FEE SCHEDULE:

Class Duration	Frequency	Price (Monthly)
<b>BEGINNERS LEVEL</b>		
<b>45 Minutes</b>	1x per Week	<b>\$100</b>
	2x per Week	<b>\$190</b>
<b>ADVANCED LEVEL</b>		
<b>Option 1: 90-Minute Class - 2x per Week</b> (Attend two 90-minute classes per week)	2x per Week	<b>\$290</b>
<b>Option 2: Bundle - 3x per Week</b> (2 classes per week, 90 minutes each + 1 class per week, 60 minutes)	3x per Week	<b>\$400</b>

**10% discount will apply to the 2<sup>nd</sup> child- Group lessons only**

### **Private lessons with Professional Instructors:**

- Single Lesson: **\$110 per 45 minutes** class
- Prepaid package of 5 private lessons: **\$500**
- Prepaid package of 10 private lessons: **\$950**
- Semi-private lesson (more than 1 couple): **\$30** per person, 2 couples minimum

### **Private Lessons with an Associate Instructor:**

- Single Lesson - **\$80** (45 minutes)
- Prepaid Package of 10 Lessons - **\$700**

As the parents or legal guardian(s) of \_\_\_\_\_, we hereby give permission for our child to participate in dance classes at ILTA DANCE STUDIO, Inc. located at 1255 Worcester Road, Framingham, MA 01702.

On behalf of our child and on our own behalf, we agree to waive all claims against ILTA DANCE STUDIO, Inc., its owners, staff and instructors for any liability, loss, cost, damage, medical expense, long term or short-term care or emotional distress arising out of personal injury, including total disability, paralysis, or death, which may occur to any of our children while on the premises of ILTA DANCE STUDIO, Inc.

We hereby testify to our child's sound health of mind and body and we authorize ILTA DANCE STUDIO, Inc. to seek medical treatment at the nearest medical facility in case of emergency.

We have read and understand all the above and agree to all of the above terms, including the Waiver of Liability

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date