



**Studio Address:**  
 Jackie's Jammin Studios  
 3040 W Cypress Street  
 Tampa, FL 33609

**Mailing Address:**  
 Jackie's Jammin Studios  
 1208 E Kennedy Blvd., Suite 224  
 Tampa, FL 33602

Student Information				
Last Name	First	MI	DOB	Age
Address				
City		State	Zip	
Home Phone	Mobile Phone	Email Address		
Parent / Guardian Information				
Last Name	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian			First
Home Phone	Mobile Phone	Work Phone	Email Address	
Last Name	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian			First
Home Phone	Mobile Phone	Work	Email Address	
Emergency Contact Information				
Name			Phone	
Enrollment Information				
Class / Camp	Day	Time	Teacher	Fee:
<input type="checkbox"/> <b>Mail Invoices:</b> Select this option if you would like to receive invoices by postal mail. Please note all invoices will be e-mailed.			Registration Fee	
			Total Due	



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**Payment Information**

Cash   
 Check   
 MC/Visa   
 Amex   
 Discover

Credit Card Number	Expiration Date
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Name On Card

Billing Address


**Automatic Credit Card Payment:** By selecting this option, you are authorizing monthly tuition and all other studio fees to be automatically charged to your credit card on file. To discontinue ACCP, please provide written notice prior to the first of the upcoming month.

**Student Waiver and Release**

I, the undersigned parent/guardian, do hereby give permission for my son/daughter to attend and to participate in dance classes, rehearsal, performances, or other activities conducted by Jackie's Jammin Studio. Recognizing the risks of illness and injury inherent in any dance participation I, the undersigned, on behalf of my child/ward, do agree to hold harmless Jackie's Jammin Studio and its staff, officers, directors, agents, and volunteers from any and all injuries, cost, losses, damages and expenses (including attorney's fee) or other liability arising from, related to, or connected with any injury or illness or damage caused by or sustained in the course of any participation in classes, rehearsals, performances, or other activities conducted by or associated with Jackie's Jammin Studio. By signing this agreement I understand and I agree to indemnify and hold harmless Jackie's Jammin Studio, its staff, officers, directors, agents, and volunteers. I understand that my child/ward would not be permitted to participate without making this agreement.

Jackie's Jammin Studios is hereby granted permission to take photographs, audio and video recordings of the student to use in brochures, web sites, posters, advertisements and other promotional materials the school creates. Permission is also hereby granted for the school to copyright such photographs in its name.

**Monthly tuition is due on the 1<sup>st</sup> of each month. A \$10.00 late fee will apply for payments received after the 7<sup>th</sup>. Invoices for other fees are due upon receipt.**

Signature of Parent/Guardian (Student if over 18) 	Date 
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**Additional Information**

List Previous Instruction and Schools

How Did You Learn About Us?