



YMCA PCS Code: _____
Notes: _____
GD: ____ AS: ____

Y Dance Adult Registration Form: Fall 2016

Personal Information:

Dancer's Name: _____
Date of Birth: _____ Age: _____ Sex: _____
Address: _____ _____
Cell Phone: _____ Work Ph: _____ Home Ph: _____
Email: _____
Allergies: _____

Emergency Contact: Person to be notified in case of illness or accident.

Name:	Phone:	Alternate Phone:

How did you learn about the program (Circle One)? Newspaper | School | Friend

Other: (please specify) _____

I would like to be contacted to be a Y Dance volunteer: Yes or No.

Student Statement of Understanding

I agree to release the Family YMCA at Tarrytown and their faculty from all claims and liability in the event of personal injury or property loss.

In the event of an emergency, I hereby give permission to the physician selected by the YMCA staff to care for me.

I hereby give my consent to Family YMCA at Tarrytown, and to such other person(s) as the Family YMCA at Tarrytown may designate, to use my name, voice, statements, and portrait or picture (motion or still) for advertising purposes, for purposes of trade, or for any lawful purpose whatever, in any media now known or hereafter developed.

I understand that when contact information changes that I will notify the YMCA of these changes.

I have read and fully understand the statement above.

Signature
Date

Y Dance: Fall 2016 Registration

Y Dance
Family YMCA at Tarrytown
62 Main Street, Tarrytown, NY, 10591
914.631.4807 x 114
ydance@ymcatarrytown.org

Circle the tuition rate according to membership status **and** the number of classes you will be taking per week.

Classes/week	60 Minute Classes			90 Minute Classes		
	Non-member	Single Member	Family Member	Non-member	Single Member	Family Member
1	\$328	\$274	\$219	\$410	\$342	\$274
2	\$640	\$534	\$427	\$800	\$667	\$534
3	\$936	\$780	\$624	\$1,170	\$975	\$780
4	\$1,214	\$1,012	\$810	\$1,518	\$1,265	\$1,012
5	\$1,477	\$1,231	\$985	\$1,847	\$1,539	\$1,231
6	\$1,724	\$1,437	\$1,149	\$2,155	\$1,796	\$1,437
7	\$1,954	\$1,628	\$1,302	\$2,442	\$2,035	\$1,628
8	\$2,167	\$1,806	\$1,444	\$2,708	\$2,257	\$1,806
9	\$2,364	\$1,970	\$1,576	\$2,954	\$2,462	\$1,970

Checks can be made out to YMCA

Refund Policy: The Family YMCA at Tarrytown can honor refunds for the following circumstances:

1. 100% refunds for requests 2 days prior to the first day of class
2. If the YMCA/Y Dance cancels class due to low enrollment
3. Documented Medical Reason (Doctor's note)

Any other circumstances the YMCA cancels will be considered for program credit (good for any YMCA program).

A \$10.00 fee will be assessed to process any refund/credit other than the YMCA cancelling class.

Please list your classes:

Name of Class:	Day/Time:	Instructor:
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		
6. _____		
7. _____		
8. _____		
9. _____		

For internal use only (date/initial):

Payment Type (Cash, Check, CC)	Date	Initial Payment	Notes
Financial Aid?	%	Expiration Date	

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