



Student Registration Form 2009-10

Stepping Stones / Junior Company / Men in Motion / Apprentice Corporation
 PO Box 17628, Atlanta, GA 30316—www.movinginthespirit.org—404.624.5295—404.624.5299(fax)

Student Information

Student's First Name: _____ Last Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone (H): _____ County: Fulton DeKalb Other (Specify): _____
 Resident of City of Atlanta? Yes No
 Date of Birth: _____ Age: _____ Gender: _____ Grade Level: _____
 School: _____
 Student's ethnic background (circle)
 Caucasian, African American, Asian, Hispanic/Latino, Native American, Other

Family Information

Name(s): _____ Relationship to Student: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____ E-mail: _____
 Phone (H): _____ (W): _____ (C): _____
 Is this the Primary Emergency Contact? Yes No
 Student Lives with: both parents mother father other _____
 Number of people in your household, including the student: _____
 How did you hear about Moving in the Spirit?: _____

Emergency Information

Contact Person (in addition to parents): _____
 Phone (H): _____ (Cell): _____
 Medical conditions, food allergies, other limitations: (specify) _____

 Physician: _____ Phone: _____
 Health Insurance Carrier: _____

Optional Data

The following information is needed for statistical data related to Moving in the Spirit programs. It will not affect your child's participation in Moving in the Spirit programs and will be kept confidential. Completion of this section is optional; however, your assistance is greatly appreciated.
 Annual Household Income: _____
 Are you currently receiving public assistance? Yes No
 If yes, list types (AFDC, SSI, etc): _____

Classes

Date Enrolled	Class Title	Day of week	Payment Amount	Payment Enclosed

For Moving in the Spirit classes, I will pay fees: annually semi-annually monthly
 My family is applying for a scholarship

Moving in the Spirit 2009-10 Parent Contract of Commitment and Release

revised 07-27-09

I do hereby give my child, _____, permission to participate in this program. I commit to make every effort to get my young dancer to classes and related programs on time and prepared, as well as pick him or her up on time. I realize that Moving in the Spirit fosters the values of responsibility, respect and dedication and will do all that I can to uphold these principles. I realize that if my child chooses to act in a manner that is inappropriate and disruptive, he/she will be asked to leave the class and will not be able to re-enter the class without a conference with my child, the Moving in the Spirit teacher and myself.

Moving in the Spirit EDUCATES, INSPIRES and UNITES young people through dance in order to help them become successful, compassionate leaders. For the purpose of maintaining a high quality standard in our participants' technical ability, performance quality, and personal growth, we ask that all parents and dancers thoroughly read, understand, and agree to the following:

I hereby authorize the bearer who is a member of the staff of Moving in the Spirit to sign on my behalf any and all forms required to obtain emergency medical treatment or hospital care for my child. I specifically authorize and request that you provide necessary emergency treatment to my child. A photocopy of this authorization shall have the same force and effect as the original.

I hereby give Moving in the Spirit and its representatives permission to use (display, sell, publish, license, etc.) photographs and video recordings made of my child for all purposes, including advertising, editorial, trade and stock photography and videography. I do hereby release, protect, indemnify and hold harmless, Moving in the Spirit, INC and it's agents, representatives, employees, successors and assigns, from and against any and all claims, liabilities, suits, actions, or proceedings which may arise out of, or in any way may be connected with, any illness or injury occurring during the off-site field trips. This indemnity shall include, but shall not be limited to, indemnification with respect to any costs of defense and attorney fees.

I understand that my child will participate in the **Holiday Store** in December and the **Year-end Performance** in May, at the Rialto Center. This will also require participation in the dress rehearsal. I do hereby give my child permission to participate in any off-site field trips that are part of the Moving in the Spirit program. If my child chooses to act in a manner that is inappropriate and disruptive off-site, I will come and pick him/her up at the site.

I understand that Moving in the Spirit utilizes, as part of the program evaluation process, the Piers-Harris-2 Children's Self-Concept Scale and other assessment tools. I understand my child's information will remain confidential and consent for my child to take the surveys.

For Apprentice Corporation Parents Only

I understand that my child is participating in the Apprentice Corporation program. I understand that my child will be matched with an adult volunteer mentor from the community. I understand that my child will be involved with Moving in the Spirit for an eleven-month period, from Sept 2009 - July 2010. Total tuition for the eleven-month period is \$660, or \$73.50/month. Tuition is based on a yearly fee for the total amount of instruction provided, not the number of classes per month. Tuition payments are spread over a 9-month period. The first payment of \$73.50 is due at registration. Subsequent payments of \$73.50 are due on the first day of each month thereafter, beginning Sept 1. If I am applying for a scholarship, my payment will be applied towards my scholarship award amount. Allowances have been made for holidays.

For Junior Company Parents Only

I understand that my child is participating in the Junior Company program. I understand that my child will be matched with an adult volunteer mentor from the community. I understand that my child will be involved with Moving in the Spirit for a ten-month period, from Sept 2009 - June 2010. Total tuition for the ten-month period is \$450, or \$50/month. Tuition is based on a yearly fee for the total amount of instruction provided, not the number of classes per month. Tuition payments are spread over a 9-month period. The first payment of \$50 is due at registration. Subsequent payments of \$50 are due on the first day of each month thereafter, beginning Sept 1. If I am applying for a scholarship, my payment will be applied towards my scholarship award amount. Allowances have been made for holidays.

For Stepping Stones and Men in Motion Parents Only

I understand that my child will be involved with Moving in the Spirit for 1 or 1.5 hours of weekly dance instruction for a nine-month period, from Sept 2009 - May 2010. Total tuition for the nine-month period is \$315, or \$35/month. Tuition is based on a yearly fee for the total amount of instruction provided, not the number of classes per month. Tuition payments are spread over a 9-month period. The first payment of \$35 is due at registration. Subsequent payments of \$35 are due on the first day of each month thereafter, beginning Sept 1. If I am applying for a scholarship, my payment will be applied towards my scholarship award amount. Allowances have been made for holidays.

Parent/Guardian Signature

Date

Daytime/Evening Phone Number(s)



Scholarship Application

Please return to Moving in the Spirit
Mail: PO Box 17628 Atlanta, GA 30316
Delivery: 750 Glenwood Avenue Atlanta, GA
Fax: (404) 624-5299 Attn: Corissa Castle Wood

Moving in the Spirit strives to provide dance instruction and leadership opportunities to all interested students, regardless of economic means. Scholarships are available for students based on financial need. **Scholarship Applications are accepted until September 26, 2009.** Only one Scholarship Application is needed per household, but each dancer participating in Moving in the Spirit's programs must complete a Student Registration Form. Please contact Corissa Castle Wood (404) 624-5295, with questions.

Please **include** the following with your application:

1. A completed Scholarship Application
2. **Income Verification** Copy of two (2) pays stubs **OR** Copy of last year's tax return (form 1040 or W-2) **OR** letter from your employer verifying your current salary **OR** Copy of Social Security/Disability checks/award letters.
3. **Letter** stating your reasons for a Moving in the Spirit need-based scholarship (addressed as "Dear Moving in the Spirit"). **Must be detailed and descriptive.**

Once chosen, the parent(s) and student(s) must agree to the following:

- 1) Parent(s) must attend all bimonthly Parent Association meetings. Meetings occur in September, November, January, March, and April.
- 2) If the student misses 3 consecutive classes, he/she forfeits scholarship.
- 3) Parent must be an active participant in the Moving in the Spirit Parent Association. Activities may include:
 - a) Volunteer to be the Moving in the Spirit class parent for your student's class
 - b) Be a spokesperson for Moving in the Spirit at public events and meetings
 - c) Clean The Beam dance space once a month (bathrooms, break rooms, etc)
 - d) Help with sending mailings
 - e) Participation in Moving in the Spirit fundraising activities
 - f) Parents & students each must write a thank you letter to our scholarship funders by your dancer's first class in November 2009. Students ages 3 to 7 should draw a picture in lieu of writing a letter.

All information turned into Moving in the Spirit will remain confidential

Dancer's Name: _____ Birth Date: _____ class: _____

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Name of Parent(s) or Guardian(s): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

(continued on back)

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Best Contact Phone #: _____

Are you married? Yes No Spouse's Name: _____

Mother's Occupation: _____

Employer _____ Salary \$ _____ per _____ (week, month, year)

Father's Occupation: _____

Employer _____ Salary \$ _____ per _____ (week, month, year)

All other income (rental income, child support, Social Security, etc) List sources here:

Are you currently receiving public assistance?

Annual Household Income: _____

Are you receiving free or reduced lunch? No Yes (circle) free reduced

Number of people living in your household, including the student: _____

Are you or your spouse a full/part time Student? Yes No

Where? _____ # of hours per week _____

I understand that I am completing an application for consideration of a scholarship at Moving in the Spirit. The application will be reviewed and I will be contacted regarding my family's scholarship award. By signing this application, I am stating my desire receive a scholarship through Moving in the Spirit. I understand that Moving in the Spirit can reject my application without explanation. This information provided in this application is accurate to the best of my knowledge.

Parent's Signature: _____ Date: _____

I have included all of the following in my Scholarship Application.

A completed **Scholarship Application**

Income Verification Copy of two (2) pays stubs OR Copy of last year's tax return (form 1040 or W-2) OR A letter from your employer verifying your current salary OR Copy of Social Security/Disability checks/award letters.

Letter stating your reasons for a Moving in the Spirit need-based scholarship (addressed as "Dear Moving in the Spirit"). **Must be detailed and descriptive.**