



Florida Ballroom Dance Teachers Academy Enrollment Agreement

830 N. Wickham Road, Suite 5
Melbourne, FL 32935
321-255-1537

Student _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone: _____ Date of Birth: _____ SS# _____

Emergency Contact: _____ Relationship: _____

Student has had the program fully and completely explained to him/her and agrees to abide by the terms listed in the Enrollment Agreement (hereinafter called "Agreement") and by the regulations and policies of Florida Ballroom Dance Teachers Academy (hereinafter called the "Academy"). This agreement and the catalog constitute the entire agreement between the Academy and the Student. The Student understands that if the Agreement is accepted by the Academy it shall be deemed a binding contract.

I hereby enroll at Florida Ballroom Dance Teachers Academy for:

- Dance Teacher Training (Seeking a Diploma)
- Personal Enrichment (Social Dancer, Certificate of Completion)

Total Clock hours in Program: 256 Clock Hours Per Quarter: 64

Class Schedule: _____

Starting Quarter (circle one):

Smooth Rhythm 1 Rhythm 2 Nightclub

Start Date: _____

Anticipated Completion Date: _____

I agree to pay a non-refundable enrollment fee of \$25.00 and tuition as stated below, plus books and Student supplies.

Tuition: \$425.00/month. Tuition for the month is due in full at the first class of each new month.

Estimated Books: Range from \$114 - \$308 depending on number of quarters taken.

Dance Shoes: Range from \$35 - \$150 depending on style and manufacturer.

A late fee of \$15 will be assessed for late payments. Tuition is late if paid after the first class of the month. The Student will be liable for all late charges, reasonable attorney's fees and all other costs necessary for the collection of all unpaid fees. Payments may be made by check, cash or credit card.

I UNDERSTAND THAT TUITION CHARGES ARE FOR THE RIGHT TO ATTEND CLASS IN WHICH I AM ENROLLED AND ARE IN NO WAY CONTINGENT UPON MY SATISFACTORY PROGRESS, PERSONAL SATISFACTION, OR PLACEMENT UPON GRADUATION. I FURTHER AGREE TO ABIDE BY ALL RULES OF FLORIDA BALLROOM DANCE TEACHERS ACADEMY.

The Academy reserves the right to withhold the Diploma or Certificate of Completion or dismiss any Student for maintaining poor academic standing, excessive absences, failure to comply with the regulations of the Academy as stated in current literature or for nonpayment of tuition and fees when due.

I understand and agree that although this Agreement is executed for a period of only one (1) quarter, my entrance for Florida Ballroom Dance Teachers Academy for subsequent quarters shall constitute a renewal of the terms of this Agreement except for the tuition charges and fees which may be subject to change.

CREDITS: I understand that the Academy does not confer college credits and that no college credits are accepted by the Academy.

EMPLOYMENT ASSISTANCE: The Academy does not guarantee any Student employment upon graduation; however, Florida Ballroom Dance Teachers Academy will provide limited placement services as outlined in the Academy Catalog.

DISCLAIMER: In the event of a dispute arising out of this Agreement, the Academy shall be entitled to reimbursement of all reasonable attorney's fees and costs expended by the Academy in the resolution of the dispute or collection of monies due; and in the event of litigation, the prevailing party shall be entitled to recover reasonable attorney's fees and costs. Florida Ballroom Dance Teachers Academy cannot be held liable if the Student is unable to obtain certification due to information not disclosed. **NOTICE TO BUYER (A) DO NOT SIGN THIS CONTRACT BEFORE YOU READ IT OR IF IT CONTAINS ANY BLANK SPACES. (B) YOU ARE ENTITLED TO AN EXACT COPY OF THE CONTRACT YOU SIGN. KEEP IT TO PROTECT YOUR LEGAL RIGHTS.**

CONDITIONS ARE CONTAINED ON BOTH SIDES OF THIS AGREEMENT – READ BOTH SIDES

Refund Policy:

Tuition is paid on a monthly basis and due in full at the first class of each new month. Should a student's enrollment be terminated or cancelled for any reason, all refunds will be made according to the following refund schedule:

1. Cancellation can be made in person, by electronic mail, by Certified Mail or by termination.
2. Official date of termination is the last day of actual attendance unless earlier written notice was received.
3. All refunds will be made within thirty (30) days of receipt of cancellation notice or termination.
4. All monies will be fully refunded if the student cancels within three (3) business days after signing the enrollment agreement and making initial payment.
5. Cancellation after the third (3rd) business day, but before actual instruction begins will result in a refund of all monies paid, with the exception of the enrollment fee.
6. Tuition shall also be refunded in full, for the current month, under the following circumstances: course cancelled by the Academy, involuntary active military duty, documented death of the student, exceptional circumstances, with approval of the President of the Academy.
7. Cancellation after attendance has begun, but prior to 40% of completion of the program, will result in a Pro Rata refund computed on the number of hours completed to the total program hours. A student attending 40% of one months' classes will not be entitled to a refund of any tuition paid for that month. Percentage of completion is computed from the first day of class for the month to last date of actual attendance. Time in which the student is in attendance is the criteria utilized to determine the amount of the refund. Any amounts determined to be owed the Academy as a result of these calculations are due and payable in full on the effective date of the withdrawal.

YOU ARE HEREBY ADVISED TO SEEK THE ADVICE OF A PHYSICIAN BEFORE BEGINNING THIS OR ANY OTHER DANCE OR EXERCISE PROGRAM. The owners and instructors disclaim any liability for losses or injuries sustained in connection with any advice, activity or demonstration in this dance program.

ACKNOWLEDGMENT:

I certify that to the best of my knowledge I do not have any physical or medical conditions that will prevent me from participating in this program. Furthermore, I understand that I will be standing and/or dancing for a minimum of two hours at a time twice a week.

I have read this enrollment agreement and catalog. I acknowledge receipt of an exact copy of same. This agreement contains all the terms. I acknowledge that no verbal statements have been made contrary to what is contained in this Enrollment Agreement. I also agree that the Academy may use my name and/or picture in any college literature or publications. I fully understand my rights and duties and agree to abide by them.

Student	Date	Guardian/Parent if under 18 years of age	Date
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Licensed by The Commission For Independent Education, Florida Department of Education.

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ACADEMY USE ONLY:

I Hereby Acknowledge And Accept Payment Of \$ _____ In The Form Of _____

Signed: _____
Academy Official