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Registration Form 2024-2025



The JMDC registration package must be completed and sent directly to our email jmdancecenter@gmail.com, leave it at the school office or online via this page https://jmdancemiami.com/enrollments/

Contact Information

Child's Name First Last Name	Date of Birth	MM/DD/YYYY	
This East Name		1111/00/1111	
Sex			
○Male			
○Female			
Parent's/Guardian's Name Parent's/Guardian's	s Name		
Preferred Phone e.x. 3051234567			
Address Address			
City, State, ZIP Code City, ST, Zipcode			
Empil Vous Empil			
Email Your Email			
Parent Pick Up/Afterschool Program Parent	Pick Up/Aftersch	ool	
Preferred Phone e.x. 3051234567			
Address Address			
City State 71D Code City ST Zincode			
City, State, ZIP Code City, ST, Zipcode			
Daycare/School Name Daycare/School Name			

Medical Information



Any any important medical information we should know about? Allergies/Special Health Considerations JMDC will give students an onstage experience and opportunity to gain experience theater aspects of performing. To celebrate their accomplishments, a JMDC performance will be scheduled during the months of May. This performance requires an additional fee for costumes and auditorium tickets. I, Parent's/Guardian's Name ,release JM Dance, including their individuals, instructors, staff, agents and directors, from liability in case of an accident during activities related to JM Dance, as long as the necessary safety procedures have been taken. I Parent's/Guardian's Name acknowledge that pictures and/or videos of my child(ren) may be taken during classes and or presentations for promotional purposes to support the center. I, Parent's/Guardian's Name by signing this document acknowledge and satisfactorily accept that all monthly payments for classes must be made from the 1st to the 5th day of each month. I am fully aware that all late payments, after the 5th day of each month, will be charged a

late fee of \$25.00. There is a \$5 credit card fee on monthly payment and registration. Any time the card processor gives us a 'no funds' error, the system will automatically process the payment

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June 7, 2025

<u>again.</u>



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JM Dance Center Recurring Payment Authorization Form

Student's Name	First Last Name	School Name	School Name

Schedule your payment to be automatically deducted from your debit or credit card. Just complete and sign this form to get started! **Cash or check will not be accepted.** All payments must be automatic from your debit/credit card.

Here's How Recurring Payments Work:

- Initials You authorize regularly scheduled charges to your debit/credit card from the 1st to the 5th of each month. You will be charged the amount indicated below each billing period. All monthly payments for classes must be made from the 1st to the 5th day of each month.
- Initials Once you enroll for the program you will be charged each month starting from the current month until you cancel by email. We have classes during school year and Summer. If the student will not participate in summer, you must cancel in advance.
- Initials Cancellation must be directly to jmdancecenter@gmail.com via email at least 10 days before your scheduled withdrawal date.
- Initials In the case of an ACH Transaction being rejected for Non sufficient Funds (NSF) or change in card information, I understand that JM Dance Center may, at its discretion, attempt to process the charge again within 30 days and I agree to pay an additional Fee charge for each attempt returned NSF, which will be initiated as a separate transaction from the authorized recurring payment.
- Initials You must notify in writing of any changes in your card/bank account information to avoid declined transactions. You will need to provide a new withdraw authorization form with the updated card information. If your payment cannot be processed due to a change in information without previous notice, you will be charged an additional fee of \$25.00.
- Any time the card processor gives us a 'no funds' error, the system will automatically process the payment again.
- Initials Any dance class canceled by the school or due to Holidays will not be rescheduled by the company, and no further discounts or refunds will be given.
- <u>Initials</u> Full payment must be made in the month of June if the student participates in the school's end of the year graduation.
- <u>Initials</u> JM Dance Center reserves the right to withdraw any student from ballet classes after one month without payment.
- Initials JM Dance Center uniform is required. The first month you will be charged an additional \$85.00 plus taxes to cover the cost of the uniform.
- Initials JMDC uniform includes a black leotard with the company logo, a black ballet skirt, one pair of ballet slipper and pink stockings. In addition, 15 days later from registration you will be charged \$95.00 registration fee, that will be applied for the annual JMDC performance at the theater, this fee is not refundable in case the student does not participate in the show or if the student cancels classes. This fee will not apply for graduations you must purchase the full package.

Please complete the information below:

i, Parent's/Guardian's Name authorize JM Dance Center to charge my credit/debit ca	arent's/Guardian's Name	authorize JM Dance Center to charge my credit/debit ca
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indicated below for \$ in the 01	of each Month for payment of my Dance Classes,	
plus a \$5 credit card fee.		
I, Parent's/Guardian's Name	authorize JM Dance Center to charge my credit/debit card.	
indicated below for \$ only for the firs	st month (this amount includes first month & uniform fee),	
plus a \$5 credit card fee.		
Cardholder Name: Cardholder Name		
edianolaei Namei		
Card Number:		
Exp Date: MM / YY CCV		
Phone Newshor		
Phone Number e.x. 3051234567		
Email Your Email		
	understand that this authorization will remain in effect until	
I cancel it in writing, and I agree to notify JM Dance		
	east 10 days prior to the next billing date. If the above	
	I understand that the payments may be executed on the savings account, I understand that because these are	
•	awn from my account as soon as the above noted periodic	
transaction dates. In the case of an ACH Transactio	·	
	ion attempt to process the charge again within 30 days and	
agree to an additional Fee charge for each attempt		
	. I acknowledge that the origination of ACH transactions to	
	. law. I certify that I am an authorized user of this credit	
	uled transactions with my bank or credit card company, so	
long as the transactions correspond to the terms in	dicated in this authorization form.	
June 7, 2025		
X	NA:	
	—×Jeniffer Munives	
	Cianad Dy Janiffar Municas	

Signed By Jeniffer Munives Signed On: May 30, 2025



Signature Certificate

Document name: Registration Form 2024-2025



☐ Unique Document ID: E0F87D88C10980E758F7D9BB46B39021AED24AE5

Timestamp

August 28, 2021 9:01 am **EDT**

Audit

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This audit trail report provides a detailed record of the online activity and events recorded for this contract.

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