2017-2018 Registration Packet

Eagan Just For Kix

This is more than dance.

Here, memories are made.

REGISTER ONLINE NOW!

Fast and Convenient Online Registration is now open! Follow the registration directions below to complete your registration for the upcoming season!

How to Register

> New Dancers:

- 1. Create an account
 - Go To: www.justforkix.com/danceclasses
 - · Click "Sign up" in the Upper Right hand Corner
 - Click "Sign up now"

This will be your family account: You should enter the parents/guardian information here. There will be a place to register individual students later.

- 2. Do a search on your Zip Code. Only classes that apply to your child(ren) will show up in the listing. You can further filter the search by day time or you can search by the course number listed by the class in this registration packet.
- Add classes and uniform pieces that you would like to register for and order. You can check out all at once at the end of the process.

Registration fee and first month payment due at time of registration.

> Existing Dancers:

⚠ If you have been in our classes in the past year, you have an account.

The username for the account is your email. It is the email you receive your Just For Kix emails at. If you do not remember your password you can reset this on the log in page using your username. If you are not sure of the username (email) you used to set up your account please contact the Just For Kix office at 218-829-7107.

To register, login at www.justforkix.com/danceclasses.

Chelsie Hilzinger

612-227-2040

eagan_mn@justforkix.com







Take advantage of our EASY Recurring Payment option.

By simply checking the box under Auto Pay, payment will automatically be applied to the credit card on file, ensuring your payments are never late and that you will never receive a late fee!

Uniform Notes:

- Your dancer will be sized at class for their uniforms. Contact your director if you were not given your dancers recommended sizing. In most cases, with our leotards, if you work off your dancers regular clothing size, and go up one size to allow for growth, you should come pretty close to the size that you need. Pants sizes are pretty true to the dancers regular clothing size.
- Uniforms may be exchanged or refunded within 30 days of receiving them as long as they have not been worn.
- Uniform orders will be delivered to the student at class.
- Uniform orders take 10 -12 weeks to produce. Spring orders will be delivered at class in the fall.

Payment Policy

- Payments are due on the 1st of the month. Dancers must be paid prior to the 1st class of the month in order to participate. A \$10.00 late fee will be assessed to late payments.
- Payments should be made at www.justforkix.com/danceclasses.
 If you cannot pay online, please call our office at 218-829-7107
 Monday-Friday 8:00-4:30pm or mail to the Just for Kix office at P.O. Box 724 Brainerd, MN 56401. Time should be allowed for the payment to be received and processed prior to the 1st of the month.
- You now have the option of recurring payments. Sign up to have payments charged to your card on file on the first of the month.
 Never forget a payment, or get charged a late fee.
- Discounted registration fees are available for families who have multiple siblings dancing with us. Registration fees are \$16.00 for the first student and \$9.00 for each additional sibling.
- If you do not have online access you may return the Uniform Page, Personal Data the Registration Fee and your September payment to the Just For Kix Office at P.O. Box 724 Brainerd MN 56401

I look forward to working with your dancer this season. See you at class!

Chelsie Hilzinger 612-227-2040 eagan_mn@justforkix.com



Schedule for Eagan - MN

Facility	Style	Class Name	Fee	Grade / Age	Day	Time	Uniform	Instructors	Start Date	End Date
Community of Joy Church	Kick	Kick: Pre-Petite	33.00	4-5 yrs	Tu	5:45p.m 6:15p.m.	Dizzy Daisy	Chelsie Hilzinger	9/12/17	5/01/18
Community of Joy Church	Kick	Kick: Tiny	33.00	3-3 yrs	М	5:35p.m 6:05p.m.	It's A Fairytale	Chelsie Hilzinger	9/11/17	4/30/18
Community of Joy Church	Kick	Kick: Wee Petite	36.00	K-1	Tu	4:50p.m 5:35p.m.	Meant To Be	Chelsie Hilzinger	9/12/17	5/01/18
Community of Joy Church	Kick	Kick: Wee	36.00	2-3	Tu	6:20p.m 7:20p.m.	Dress To Impress	Chelsie Hilzinger	9/12/17	5/01/18
Community of Joy Church	Kick	Kick: Mini	36.00	4-6	М	6:10p.m 7:10p.m.	Swoosh	Chelsie Hilzinger	9/11/17	4/30/18
Community of Joy Church	Jazz	Jazz :Mini	36.00	3-5	М	4:30p.m 5:30p.m.	Shimmy Biketard	Chelsie Hilzinger	9/11/17	4/30/18
Community of Joy Church	Kick	Kick: Junior	36.00	7-12	М	8:10p.m 9:10p.m.	Orange Crush	Chelsie Hilzinger	9/11/17	4/30/18
Community of Joy Church	Jazz	Jazz: Junior	36.00	6-12	М	7:10p.m 8:10p.m.	Fame	Chelsie Hilzinger	9/11/17	4/30/18

^{**}Core Kick is a prerequisite for Jazz and Lyrical classes. Ballet would also fulfill the Core Kick prerequisite in programs where ballet is offered.



Kick: Pre-Petite

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

Tu 5:45p.m. - 6:15p.m. • Age 4 - 5

\$33.00/per month

Uniform: **Dizzy Daisy**

Dates: 9/12/17 - 5/01/18

Facility: Community of Joy Church Instructors: Chelsie Hilzinger Course #: MK11264



1	Size	Item#	Description **required	Price
		07	Pink Ballet Shoes	\$17.00
		42	Alexandra Footed Pink Tights	\$9.00
		S032	Dizzy Daisy Skirted Leo	\$58.00

Check the item(s) you want to order

Class Fee	
Registration Fee	\$16.00

^{**}Item required for performance.

Eagan - MN

Student's name (print):

Kick: Tiny

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

Total:

M 5:35p.m. - 6:05p.m. • Age 3 - 3

\$33.00/per month

Uniform: It's A Fairytale

Dates: 9/11/17 - 4/30/18

Facility: Community of Joy Church

Instructors: Chelsie Hilzinger

Course #: MK9124

Item# Description **required Price \$64.00 K106 It's A Fairytale Skirted Leotard** 2366T Turquoise Feather Barrette-Dasha** \$6.00 Pink Ballet Shoes** \$17.00 07 \$9.00 42 Alexandra Footed Pink Tights**

Check the item(s) you want to order

Class Fee	
Registration Fee	\$16.00

^{**}Item required for performance.

Eagan - MN

Student's name (print):

Total	 :



Kick: Wee Petite

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

Price

\$17.00

\$9.00

\$7.00

\$62.00

Tu 4:50p.m. - 5:35p.m. • Grade K - 1

\$36.00/per month

Uniform: **Meant To Be**

Dates: 9/12/17 - 5/01/18

Facility: Community of Joy Church Instructors: Chelsie Hilzinger

Course #: MK9125



_			
Check	the item	(s) vou w	ant to order

√ Size

Item#

K109

R011B

40

05

Item#

06

43

H0308

K207

Class Fee	
Registration Fee	\$16.00

Alexandra Footed White Tights

Description **required

White Ballet Shoe

Silver Bow

Meant To Be

Student's name (print):

Kick: Wee

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

Total:

Price

\$9.00

\$65.00 \$4.00

\$17.00

Tu 6:20p.m. - 7:20p.m. • Grade 2 - 3

\$36.00/per month

Uniform: **Dress To Impress**

Dates: 9/12/17 - 5/01/18

Facility: Community of Joy Church

Instructors: Chelsie Hilzinger

Course #: MK9128



Check the item(s) you want to order

Class Fee	
Registration Fee	\$16.00

Black Footed Tight by Alexandra**

Dress To Impress Biketard**

Black Glitter Headband**

Black Ballet Shoe**

Description **required

Eagan - MN

Student's name (print):

Total:___

^{**}Item required for performance.

^{**}Item required for performance.



Kick: Mini

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

M 6:10p.m. - 7:10p.m. • Grade 4 - 6

\$36.00/per month

Uniform: Swoosh

Dates: 9/11/17 - 4/30/18

Facility: Community of Joy Church Instructors: Chelsie Hilzinger

Course #: MK9127



Class Fee	
Registration Fee	\$16.00

^{**}Item required for performance.

Eagan - MN

Student's name (print):

Total:____



Jazz:Mini

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

M 4:30p.m. - 5:30p.m. • Grade 3 - 5

\$36.00/per month

Uniform: Shimmy Biketard

Dates: 9/11/17 - 4/30/18

Facility: Community of Joy Church

Instructors: Chelsie Hilzinger

Course #: MK9123



Check the item(s) you want to order

Class Fee	
Registration Fee	\$16.00

^{**}Item required for performance.

Eagan - MN

Student's name (print):

Total:		
i Otai.		



Kick: Junior

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

Price

\$34.00

\$71.00

\$4.00

\$9.00

\$28.00

M 8:10p.m. - 9:10p.m. • Grade 7 - 12

\$36.00/per month

Uniform: **Orange Crush**

Dates: 9/11/17 - 4/30/18

Facility: Community of Joy Church Instructors: Chelsie Hilzinger

Course #: MK9126



0	Check	the item(s) vou	want to	order

R011HP Hot Pink Headband

Class Fee	
Registration Fee	\$16.00

Black Footed Tight by Alexandra**

Black High Waist Leggings**

Description **required

Orange Crush Leotard**

Black Alexandra Jazz Shoe**

Item#

11

41

K137

H0310

Item#

K114

M285

10

Eagan - MN

Student's name (print):

Total:	
i Otai.	

Price

\$34.00

\$9.00 \$50.00

\$8.00



Jazz: Junior

*if 2 pairs of shoes are listed, only 1 required, making the total price less than shown.

M 7:10p.m. - 8:10p.m. • Grade 6 - 12

\$36.00/per month

Dates: 9/11/17 - 4/30/18

Facility: Community of Joy Church

Instructors: Chelsie Hilzinger

Course #: MK9122





Rhinestone Barrette Check the item(s) you want to order

Class Fee	
Registration Fee	\$16.00

^{**}Item required for performance.

Description **required

Fame Biketard

Tan Alexandra Jazz Shoe

Tan Footed Tights by Alexandra

Total:____

Eagan - MN

Student's name (print):

^{**}Item required for performance.

Do NOT use this form if you are registering online.

Just For Kix Dancer Personal Data/Medical Form

Address:	Dancer's Na	ame:	Date of Birth:	Date of Birth:		
City: State: Zip: Home Phone: ()						
*Primary E-mail Address: Student Email Address: **Student Email Address: **Preame not that this is our PRIMARY source of communication, and this will be our contact for updates and information. In most cases this should be a pavent. **You renal information may also be added to our distinate to notify you of special catalog others, discounts, tips and updates are well as current/uccoming events offered by Just For Rix. **Work Plane: **Grade: **Work Phone: () **Mother's Email (if different than above): **Cell Phone: () **Father's Name: **Work Phone: () **Cell Phone: () **Tehint Size: YXS - 2/4 YS - 6/8 YM - 10/12 YL - 14/6 AS AM AL AXXL **If you have a sibling in the program, please list their name and grade: **How did you hear about JFK?** **If parents/guardians cannot be located, who should be contacted in case of an emergency? Name: **Work Phone: () **Cell Phone: () **Mork Phone: () **Medical Information.** **Mork Phone: () **Cell Phone: () **Medical Information.** **Mork Phone: () **Cell Phone: () **Mork Phone: () **Cell Phone: () **Mork Phone: () **Cell Phone: () **Medical Information.** **Mork Phone: () **Cell Phone: () **Medical Information.** **Mork Phone: () **Cell Phone: () **Mork Phone:				Home Phone: ()	
**Please and that this is our PRIMARY owner of communication, and this will be our contact for updated and information. In more cases this about to a parent. Your realishing may be be added to a discount of the property of					,	
Vote mail in the processed information with any other company. School: Grade: Grade: Grade: Work Phone: ()	Student Em	nail Address:				
Mother's Name:		Your email info may also be added to our database to notify you	of special catalog offers, discounts,			
Mother's Name:	School:			Grade:		
Mother's Email (if different than above): Cell Phone: ())	
Father's Email (if different than above):	Mother's Er	mail (if different than above):		Cell Phone: (
T-shirt Size: YXS - 2/4 YS - 6/8 YM - 10/12 YL - 14/6 AS AM AL AXL AXXL If you have a sibling in the program, please list their name and grade: How did you hear about JFK? If parents/guardians cannot be located, who should be contacted in case of an emergency? Name: Work Phone: () Cell Phone: () Work Phone: () Cell Phone: () Cell Phone: () MEDICAL INFORMATION: If, in the judgment of any representative of Just For Kix, the above dancer should need immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given to said dancer by any physician. Do you have Allergies or allergic reactions to medications? Do you have a previous medical condition(s) or physical/emotional problems that we should be aware of? RELEASE WAIVER: I, parent or guardian of the above named dancer, hereby give approval for participation in the Just For Kix Dance Team program and events. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless Just For Kix, it's Directors, Instructors, organizers, sponsors, supervisors, participants and owners. Parent or Guardian's Signature Date Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	Father's Na	me:		Work Phone: ()	
If you have a sibling in the program, please list their name and grade: How did you hear about JFK?	Father's Em	nail (if different than above):		Cell Phone: ()	
If parents/guardians cannot be located, who should be contacted in case of an emergency? Name:	T-shirt Size:	□YXS - 2/4 □YS - 6/8 □YM - 10/12 □Y	′L-14/6 □ AS □ AM	□AL □AXL □AXXL		
Name:	If you have	e a sibling in the program, please list their	name and grade:	How did you hea	ar about JFK?	
MEDICAL INFORMATION: If, in the judgment of any representative of Just For Kix, the above dancer should need immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given to said dancer by any physician. Do you have Allergies or allergic reactions to medications? Do you have a previous medical condition(s) or physical/emotional problems that we should be aware of? RELEASE WAIVER: I, parent or guardian of the above named dancer, hereby give approval for participation in the Just For Kix Dance Team program and events. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless Just For Kix, it's Directors, Instructors, organizers, sponsors, supervisors, participants and owners. Parent or Guardian's Signature Date Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	Name:			Work Phone: (Cell Phone: ()	
of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given to said dancer by any physician. Do you have Allergies or allergic reactions to medications? Do you have a previous medical condition(s) or physical/emotional problems that we should be aware of? RELEASE WAIVER: I, parent or guardian of the above named dancer, hereby give approval for participation in the Just For Kix Dance Team program and events. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless Just For Kix, it's Directors, Instructors, organizers, sponsors, supervisors, participants and owners. Parent or Guardian's Signature Date Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).				Cell Phone: ()	
Parent or Guardian's Signature Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).						
RELEASE WAIVER: I, parent or guardian of the above named dancer, hereby give approval for participation in the Just For Kix Dance Team program and events. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless Just For Kix, it's Directors, Instructors, organizers, sponsors, supervisors, participants and owners. Parent or Guardian's Signature Date Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	° Do you hav	ve Allergies or allergic reactions to medications? _				
events. I assume all risks and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless Just For Kix, it's Directors, Instructors, organizers, sponsors, supervisors, participants and owners. Parent or Guardian's Signature Date Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	° Do you hav	ve a previous medical condition(s) or physical/emo	otional problems that we sho	ould be aware of?		
Class Tuition Agreement: I am aware of tuition guidelines/policies and understand when payments are due. I also understand that if my tuition is 2 months past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	events. I ass	sume all risks and hazards incidental to such partic	cipation including transporta	tion to and from the activities;	and do hereby waive, release, ab-	
past due, my dancer will be asked to sit out at class and will not be able to participate in any JFK events or performances. I understand that it is my responsibility to obtain the class tuition amount due for my child(ren's) class(es).	Parent or Gu	ardian's Signature				
Parent or Guardian's Signature Date	past due, my	dancer will be asked to sit out at class and will no	ot be able to participate in a			
	Parent or Gu	ardian's Signature		Date		

Photo Release: If you do not want your child's photograph and/or image published, or use for Just For Kix advertising please initial here.

