

# BALLET THEATRE

## Summer Registration Form - 2008

Student Name: _____	Date of Birth:    /    /
Address: _____ _____	Age: _____
Parent Name(s): _____	Home Phone: _____
Parent E-Mail: _____	Cell Phone: _____
_____	Work Phone: _____

<input type="checkbox"/> Creative Movement – Session 1 6/30-7/21 \$50	<input type="checkbox"/> Pre-Foundation Ballet – Session 1 6/30 – 7/21 \$50
<input type="checkbox"/> Creative Movement – Session 2 6/30-7/21 \$50	<input type="checkbox"/> Pre-Foundation Ballet – Session 2 6/30 – 7/21 \$50
<input type="checkbox"/> Foundation Ballet Workshop 7/1-7/17 \$300	<input type="checkbox"/> Ballet Workshop (Intermediate) 7/1 – 7/17 \$540
<input type="checkbox"/> Int/Adv Ballet & Pointe – Monday \$245	<input type="checkbox"/> Int/Adv Ballet – Monday \$190
<input type="checkbox"/> Int/Adv Ballet & Pointe – Tuesday \$245	<input type="checkbox"/> Int/Adv Ballet – Tuesday \$190
<input type="checkbox"/> Int/Adv Ballet & Pointe – Wednesday \$245	<input type="checkbox"/> Int/Adv Ballet – Wednesday \$190
<input type="checkbox"/> Int/Adv Ballet & Pointe – Thursday \$245	<input type="checkbox"/> Int/Adv Ballet – Thursday \$190
<input type="checkbox"/> Adult Ballet – Wednesday - \$130	
<input type="checkbox"/> Hip Hop – Monday - \$130	
<input type="checkbox"/> Modern – Thursday - \$130	
<input type="checkbox"/> Jazz – Tuesday - \$130	

<p><b>Payment Information:</b></p> <p>Registration fee - \$25                    \$ _____ (paid once for 9/07-8/08 school year)</p> <p>Tuition:                                        \$ _____</p> <p>Discount                                        \$ - _____</p> <p>Credit Card service fee                    \$ _____</p> <p><b>Total Due:</b>                                 \$ _____</p> <p>Check #:</p>	<ul style="list-style-type: none"> <li>Payment must be received prior to first class.</li> <li>Tuition is payable by personal check or cash in the exact amount</li> <li>5% service fee added to credit card transactions exact amount.</li> <li>10% discount on tuition for 2 or more family members</li> <li>Please make checks payable to: Ballet Theatre Academy, 20 Jefferson Ave West Hartford, CT 06110</li> </ul>
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*Neither the studio, nor the instructors, their agents, servants and employees shall be liable to the students for personal injury, or loss of, or damage to personal property. The student/parentt acknowledges that participation in classes is at his/her own risk.*

*Payment Agreement: By signature below, Student/Guardian agrees to 1) payment of above tuition and fees; 2) make up missed classes within the semester only; 3) no transfer, credit or cash refunds. In the case of injury, tuition may be refunded or transferred on a pro-rated basis only.*

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Liability Release**

- Photo/Video Consent** is granted for my child to be photographed or videotaped. These may be used without compensation in a public presentation. The student is free to refuse to be photographed or videotaped. Without consent, however, the student may not be able to participate in certain performances.
- Physical Contact:** Dance is an art form that requires teachers to be able to have appropriate physical contact for the purpose of making technical corrections. Consent for such physical contact is granted.
- Personal Property:** We will not hold Ballet Theatre Company / Academy responsible for the loss or damage of personal property while in attendance and or participating in any Ballet Theatre Company /Academy program.

Ballet Theatre Company / Academy reserves the right to remove any student from class whose behavior is inappropriate or disruptive in the classroom. Should this be necessary, full refund of tuition will be made for the remaining classes in the session.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_