

2023-24 STUDENT REGISTRATION

Date _____

Student Name _____
First Last

Academic School _____ Grade _____ Birth Date _____ / _____ / _____ Age _____
month date year

Previous Dance Training _____
(Type, length of time, teacher/school)

Any serious medical or emotional problems _____

Parent Name/s _____

Address _____ City _____ Zip _____

Email/s _____

Phone/s _____

Parent Employer 1 _____ Parent Employer 2 _____

Emergency Contact Name _____ Phone _____

Tuition Paid by Name _____ Phone _____

Address _____ Email _____
(If different than above)

How did you hear about CITY BALLET SCHOOL? _____

CLASS LEVEL: ☐ Pre/Kinder Ballet / ☐ Ballet 1 / ☐ Ballet 2 / ☐ Ballet 3 / ☐ Ballet 4 / ☐ Ballet 5 / ☐ Ballet 6 / ☐ Trainee

Select Pre/Kinder Ballet for children age 4 and up pre-Kindergarten or enrolled in Kindergarten at academic school.

Select Ballet 1 for all beginning level children enrolled in 1st grade and up. Ballet 2 and above must be recommended by City Ballet instructors.

CLASS SCHEDULE: (select all days in your schedule) ☐ Mon / ☐ Tue / ☐ Wed / ☐ Thu / ☐ Fri / ☐ Sat

Specialty Classes: ☐ Beg. Jazz (Ballet 2/3) ☐ Int. Jazz (Ballet 4) ☐ Character (Ballet 4/5) ☐ Contemporary (Ballet 5/6/Tr)

☐ *Variations (Ballet 6/Tr) ☐ *Pas de Deux (Ballet 6/Tr)

TUITION: Recommended **FULL PROGRAM** at special discounted **Program** rate per quarter: \$ _____

Or **HOURLY PROGRAM** of _____ hours per week at discounted **Hourly** rate per quarter: \$ _____

*Variations and Pas de Deux require a minimum of 3 Ballet Technique classes per week.

Family Discount if applicable (2nd child receives 10% discount, 3rd receives 20%): \$ - _____

☐ Placement Class (Please leave Level, Schedule & Tuition areas blank at this time)

Annual Registration Fee: + \$25.00

Please see reverse for important information and required signature

Total Due: \$ _____

(Office Use Only) Date _____ Amt \$ _____ Cash /CC/ Check # _____ Received by _____ Receipt # _____

WAIVER AND RELEASE: (student) _____ has my permission to attend the City Ballet School. City Ballet School and/or Company has my permission to use any photos and/or video taken for use in promoting the School and/or Company. I give my permission for the City Ballet staff to call a doctor or the one listed below in the event of an emergency and I will assume all financial costs incurred. I recognize the risks of illness (including COVID-19) or injury inherent with any dance exercise program and I am allowing the above named to participate in the City Ballet School's program upon the express agreement and understanding that I am waiving and releasing the School and or staff from any and all claims, costs, liabilities, expenses, judgments, including attorney's fees and court costs (herein collectively "claims") arising out of the above named participation in any event or program given or sponsored by City Ballet School and/or City Ballet Company and any illness, including COVID-19 and all COVID-19 associated effects, or injury resulting therefrom. I hereby further agree to indemnify and hold harmless the School and/or Company from and against any and all such claims except claims proximately caused by the gross negligence or willful misconduct of the School and/or Company.

Doctor's Name _____ Doctor's Phone # _____
(optional)

CITY BALLET HEALTH, TUITION, AND REFUND POLICY

1. All tuition is due and payable in advance, **no later than the first week of the quarter.** Tuition may be paid quarterly, bi-quarterly (for tuition over \$500 plus a \$30 installment fee), or annually. Tuition is based on 10 weeks each quarter with four quarters in a school year. **Please note the due dates on your calendar. Only tuition in arrears will be billed, and a 10% late fee will be included. You will not receive an invoice unless your tuition is past due.** Class times range in length from 45 minutes to 2 hours.

2. Tuition is **not refundable or transferable.**

3. Students enrolled in the special Ballet 1 through Pre-Professional 6 and Trainee Programs must attend the required program classes to receive the special discounted Program tuition rate. Students not enrolled in the full recommended Program pay the discounted hourly tuition rate for the 10-week quarter. **There are no partial/reduced programs, or drop-in classes allowed in the Children's Division.** A one-time placement class is allowed for new students for placement at the school.

4. **Tuition may not be pro-rated except in the case of new students or medical disabilities.** New students registering for the first time after the beginning of the quarter will pay tuition on a pro-rated basis for the remainder of the quarter. Students returning from a medical disability will be given credit from the time credit is requested when accompanied with a doctor's statement explaining the nature of the disability or injury. Upon return to classes the credit will be applied, and tuition will be pro-rated for the remainder of the quarter if the quarter is already in progress.

5. It is necessary to notify the office by EMAIL if a class must be missed, changing class schedule, or when discontinuing. All fees are due until the office is notified by email of any class being dropped. It is the responsibility of the parent/guardian to notify the School of illness, vacation, financial problems, change in schedule or any other factor interfering with dance training and tuition policy. Missed classes due to a City Ballet School observed holiday or illness may be made-up in an appropriate class as recommended by the instructor within a quarter. **There are no refunds,** nor can missed classes be applied to a subsequent quarter's tuition.

6. **Students may not attend class if they are ill or show any symptoms of illness.** Do not send children to class if they not feeling well. **It is the responsibility of the parent/guardian to pick up students immediately if notified by the School that the student is showing symptoms of illness.** It is the responsibility of the parent/guardian to pick up students in a timely manner at the conclusion of all classes. City Ballet does not provide supervision of children before or after classes.

7. **The established dress code for each class is required by all students.**

8. CITY BALLET SCHOOL observes these pre-scheduled holidays: Labor Day, Thanksgiving Day, two-week Christmas Break, Martin Luther King Jr. Day, Easter Sunday, Memorial Day, and July 4th. (See #5 above for making up classes missed on these days.)

9. All classes are subject to change and the management reserves the right to engage a qualified substitute teacher when the regular teacher cannot attend. City Ballet School will notify parents/students of any schedule changes by email.

10. There is a Yearly Registration Fee of \$25, and a returned check with Insufficient Funds incurs a \$25 fee.

I have read and accepted the above WAIVER AND RELEASE and HEALTH, TUITION, AND REFUND POLICY:

Signature _____ Date _____
Parent/Guardian Signature Required