

2016-2017 Registration City Ballet

Please complete a separate form for each dancer

Name of Registering Dancer _____

(Clearly print the dancer's name as you would like it to appear in our recital program)

Class Requests

	Class Name	Day	Time	Hours
1.				
2.				
3.				
4.				

Tuition Information

Family Class Hours	Plan 1	Plan 2	Plan 3
1 hour weekly	\$633	\$320	\$74
1 ½ hours weekly	\$949	\$480	\$111
2 hours weekly	\$1,139	\$575	\$133
2 ½ hours weekly	\$1,424	\$719	\$167
3 hours weekly	\$1,661	\$839	\$194
3 ½ hours weekly	\$1,938	\$979	\$227
4 hours weekly	\$2,151	\$1,087	\$252
4 ½ hours weekly	\$2,420	\$1,223	\$283
5 hours weekly	\$2,610	\$1,319	\$305
5 ½ hours weekly	\$2,871	\$1,451	\$336
6 hours weekly	\$3,037	\$1,534	\$355
Each additional hr/wk	\$506	\$256	\$59
Each additional 1/2 hr/wk	\$253	\$128	\$30

To withdraw from any class, a Registration Change Form must be submitted to City Ballet 30 days before the withdrawal.

Calculate Tuition based on total Family Hours

Hours Registered	_____
Initial Payment	\$ _____
Registration Fee	+ \$30.00 - by 6/20/16 \$40.00 - after 6/20/16
Total Due	\$ _____

After 6 hours/dancer, no additional tuition is charged

Payment Plans

___ **Plan 1*** A full year's tuition: due at registration

___ **Plan 2*** 2 payments: 1/2 due at registration, 1/2 due January 5th

___ **Plan 3** 9 equal payments: 1st due at registration, remainder due by the 5th of each month, Sept – April

*Plans 1 & 2 include up to a 5% discount

Billing Information

Please Print Clearly

Billing Name	_____
Street Address	_____
City, State, Zip	_____
Telephone	Hm _____ Wk _____ Cell _____
Email address	(For important parent communication) _____

Contact Information

Student's Address (If different from billing information)

Street Address	_____		
City, State, Zip	_____		
Telephone	Hm _____	Wk _____	Cell _____

Required Information

Date of Birth	_____	<input type="checkbox"/> Female	<input type="checkbox"/> Male
School	_____	16/17 Grade	_____
Emergency Contact	_____	Telephone	_____
Special Needs/ Medical Issues	_____		

New Students Information

Previous Training:	Studio _____	Years _____	Disciplines _____			
How did you hear about us?	N&O ___	Playbill ___	Carolina Parent ___	Website ___	Recommendation ___	Facebook ___
	CB Performance ___	Midtown Magazine ___	Community Event ___	Other _____		

Policies

PAYMENT AND OFFICE RECORDS

The registration fee and 1st tuition payment is due upon registration of each student. All accounts are considered past due on the 15th and will be assessed a \$10 late fee. Statements are only generated for past due accounts. Checks should be made payable to City Ballet; a \$30 fee will be charged for any returned checks. Please inform the office if any of your contact information changes during the year.

CLASS ATTENDANCE

Attending class is the responsibility of each student. No refunds/credits are issued for classes not attended. Classes missed should be made-up in any appropriate class within 30 days. We reserve the right to cancel any class for which there is insufficient registration.

CLASS CHANGE / WITHDRAWAL

Any change in a student's registration must be submitted in writing via the **Registration Change** request form. All withdrawals require the submission of the **Registration Change** request form 30 days prior to withdrawal.

STUDIO NOTICES

Important notices will be posted on the website (www.city-ballet.com) and on the parent notice boards. Information regarding closure, other than holidays published on the City Ballet calendar, will be available on the website (www.city-ballet.com) and on the answering machine. Make-up class schedules for unforeseen closures will be posted in the studio. City Ballet does *not* follow WCPSS weather closings and delays.

PARENT / TEACHER COMMUNICATION

Teachers are available for private conferences. Please leave a message at the studio office for the teacher to call you to arrange an appointment. Class schedules do not allow adequate time for private discussions between classes.

WAIVER & RELEASE ACKNOWLEDGEMENT

City Ballet is granted permission to use my dancer's likeness and/or name in advertisements, news releases and on their website. The undersigned parent/guardian waives any claims against City Ballet or its staff for any liability including personal/bodily injury and student property loss or damage during involvement in any class or activity sponsored by City Ballet. Student participation is voluntary. The undersigned acknowledges the risks of potential injury associated with the physical aspects of dance training.

I acknowledge that I have read and agree with City Ballet policies outlined on this form and the Code of Conduct page located on our website.

Parent/Guardian Signature (Student if over 18 yrs)

Date