

**The Ballet Academy, A Royal Academy of Dance School
2015-2016 Annual Registration (September through May)**

Name: _____ Parent Name: _____
 Address _____
 City: _____ State/Zip: _____
 Home Phone: _____ Cell Phone: _____
 Email: _____
 Birthdate: _____ Age/Gender: _____
 Previous Training: _____ Yrs of Training _____
 Medical/Allergy Information: _____
 Emergency Contact: _____ Phone: _____
 How did you hear about us? _____

Please circle all applicable fees/classes. Fees are due monthly, September through May.

Times per Week

	1	2	3	4	5
New Student Registration	\$15				
Pre-school	\$36				
Pre-Primary (Sat)	\$45				
Pre-Primary (Mon)	\$45				
Primary	\$50				
Beginning Ballet (1&2)*	\$58				
Ballet 3*		\$122			
Ballet 4*		\$122	\$170		
Intermediate/Adv.*		\$122	\$170	\$226	
Semi-Private Fee	\$50/Semester for classes with less than 4 students enrolled)				
Drop-In	\$17/class	(drop-in available for trial class or adult students only)			

* RAD Presentation and Exam Fees will be due for every student that participates in the RAD exams. Students meeting the minimum skill and class requirements are eligible to take the RAD Graded Examination. The exam fee will be an additional cost.

I have read the Parent/Student Handbook and understand the policies and requirements set forth for participation in classes, etc. at The Ballet Academy.

Signature of Adult, Parent or Legal Guardian: _____ **Date:** _____

Payment Options: Please check one.

- I wish to pay for the entire year at registration.
- I wish to pay by check each month. I will write out all checks ahead of the time of registration (it is ok to date them for each month) and The Ballet Academy will deposit each check on the due date. Make checks payable to Arlene Larson.

Students in Beginning Ballet and up commit to the monthly tuition rates from registration through May. Pre-school, Pre-Primary and Primary classes commit to at least 6 months of tuition or through May.

By registering with The Ballet Academy, I understand that tuition will be due monthly through May 2016 (for Ballet 1 and up), or for the number of months agreed upon (for Pre-school, Pre-Primary and Primary). I understand that any returned check will result in a \$20 additional fee.

Amount due at registration: _____ (includes first month tuition; and New Student Fee and Exam Fee, if applicable)

Monthly tuition due: _____

Monthly payments will be due: _____

Signature of Adult, Parent or Legal Guardian: _____ Date: _____

I declare the above named person to be physically sound and able to participate in this program, and I (we) do hereby indemnify and hold harmless, release and discharge The Ballet Academy, its agents, servants, or employees from any and all claims for personal injuries, disabilities, or property damage occurring to or sustained by me or my child while participating in any dance activity or activities related to dance, and including any and all consequential damage claims which I (we) may be entitled to recover from said injury or property damage claims.

Signature of Adult, Parent or Legal Guardian: _____ Date: _____

Photo Release: I grant The Ballet Academy the right to take photographs of me or my child in connection with classes or performances. I authorize The Ballet Academy to use and publish photographs in print and/or electronically. I agree that The Ballet Academy will not compensate me for any photographs used.

Signature of Adult, Parent or Legal Guardian: _____ Date: _____