



Registration

Dancer's Name: _____

Date of Birth: _____ Age: _____ Circle one: Male / Female

Dancer's Email: _____

Academic School: _____ Grade: _____

Previous Dance Training/Teachers: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Dancer's Cell Phone Number: _____

Mother's Name: _____

Father's Name: _____

Mother's Cell: _____

Father's Cell: _____

Email: _____

Emergency contact (other than parents):

Name: _____ Phone: _____

Please list any allergies and/or medical conditions: _____

Siblings also enrolled in the AoCB: _____

How did you hear about us? _____

I do hereby release The Art of Classical Ballet and its representatives, whether paid or volunteer, from any liability that I/my child may incur during his or her participation.

Dancer or Parent Signature

I **DO/DO NOT** grant permission to The Art of Classical Ballet/Florida Classical Ballet to use my image or that of my child on social media, in advertisements, or in any other studio publications.

Dancer or Parent Signature

Registration

The Art of Classical Ballet EVENING PROGRAM fees are as follows: Please Check Box.

- 1 Class per week: \$85.00 per month
- 2 Classes per week: \$160.00 per month
- 3 Classes per week: \$230.00 per month
- 4 Classes per week: \$300.00 per month
- 5 Classes per week: \$370.00 per month
- 6 Classes per week: \$440.00 per month
- 7+ Classes per week: \$500.00 per month

The Art of Classical Ballet PRE-PROFESSIONAL MORNING PROGRAM fees are as follows: Please Check Box.

****Registering for Day Classes (Prior Approval via audition and fees discuss with Magaly Suarez)**

- 3 Days per week: \$800 per month
- 5 Days per week: \$1,000 per month

****Check two boxes if doing both pre-professional morning and evening.**

Registration Fee: \$40.00

- Late Fee (Tuition Paid After the 5th of the month): 10% (minimum \$30.00)
- Bounced Checks: \$35.00
- Family Discount (2+ Students in the Same Family): 10% Off Each Student

Dancer's Name (Print): _____

Dancer's Signature: _____ Date: _____

Parent's Signature (If under 18): _____ Date: _____

****Drop-In Days by Levels:** Advanced: Tuesday and/or Wednesday – Pre-Pro: Monday and/or Tuesday
Any other days contact for approval. Payment is due before class.