**Manassas Ballet Academy - 2021 Summer Registration Form**

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| Student’s Name: | Registration Date: |
| Age: | Grade: | DOB: | Previous Training: Y/N | How Long: |
| Street Address: | City: | Zip: |
| Parent/Guardian Name(s): |
| Home Phone: | Father’s Phone: |
| Mother’s Phone: | Father’s Email: |
| Mother’s Email | Emergency Point of Contact (POC) Name: |
| Student’s Cell Phone: | Emergency POC Phone: |
| Student’s Email: | How Did You Hear About Us? |
| Dance Class History (Classes/Studio): |

**PAYMENT**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **# of Weeks** | **# of Hours per Week** | **Total # of Hours** | **Hourly Rate** | **Amount Due** | **Discount**(If applicable) | **Total Amount Due** | **Amount Paid** | **Date Paid** | **Method**(Cash Receipt #, Check #, Visa, MC, Discover) |
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| **Dates Attending:**(circle applicable dates) | 1. June 28-July 1
 | 1. July 5-9
 | 1. July 12-16
 | 1. July 19-23
 |
| 1. July 26-July 30
 | 1. August 2-6
 | 1. August 9-13
 | 1. August 16-20
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**Rates per hour:** 1.0 - 3.5 = $22.50 4.0 - 12.5 = $18.75 13.0 – 48.5 = $15.50 49.0 – 99.5 = $12.50 100+ = $10.50

**CLASSES and REHEARSALS**

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| **Class** | **Level** | **Day(s) [Mon., Tue., Wed., Thurs., Fri.] & Time(s)** |
| Pre-Dance | N/A |  |
| Pre-Ballet | I II III IV |  |
| Ballet | I II III IV V VI VII VIII IX |  |
| Pointe & Variations | I-III |  |
| Jumps & Turns | N/A |  |
| Boys | II/III IV-VI |  |
| Pas de Deux | I/II |  |
| Tap | N/A |  |
| PBT | N/A |  |
| Character | I-III II/III IV-VI |  |
| Musical Theatre Dance | I-III II/III IV-VI |  |
| Lyrical | II/III IV-VI |  |
| Modern | I-III II/III IV-VI |  |
| Stretch & Strength | N/A |  |
| Yoga | N/A |  |
| Adult Ballet | N/A |  |
| Supplemental Studies | N/A |  |
| Showcase Rehearsal | N/A |  |
| Nutcracker Rehearsal(s) | N/A |  |

**Studio Rules and Regulations**

1. Students are expected courteous and respectful.
2. Proper class attire/uniform is required including hair suitable to class. No jewelry or watches.
3. Sweater warm-ups are allowed only in cold weather. They must be form-fitting and removed when requested by the instructor.
4. Students are to arrive at least 10 minutes early so they are warmed up and prepared for class.
5. Students need to be under parental supervision when not in the studio.
6. Students need to be picked up promptly after class.
7. Street shoes are not allowed on the studio dance floors.
8. No food, drink or chewing gum in dressing rooms, lobby, or studios. These items are only allowed in back kitchen area.
9. Parents/Guardians and/or guests may **NOT** watch classes in person at the studio.
10. Please keep noise level to a minimum in the hallway while classes/rehearsals are in progress.
11. Consistent attendance and effort are the keys to improvement. Students must attend class regularly or they may be placed in a lower-level class. Absences need to be reported to the front office as soon as possible. **Please Initial:\_\_\_\_\_**
12. All class adds or drops MUST be provided to the front office in writing. **Please Initial:\_\_\_\_\_**
13. Tuition must be paid prior to attending the first class. **Please Initial:\_\_\_\_\_**
14. Tuition will NOT be adjusted for missed classes. Make up classes should be scheduled with the front office within one month of the missed class. **Please Initial:\_\_\_\_\_**
15. All fees are NON-REFUNDABLE. **Please Initial:\_\_\_\_\_**

I (PARENT/GUARDIAN) acknowledge that it is my responsibility to fully read and understand the rules, regulations, and tuition information in this form. It is also my responsibility to read and explain the rules and regulations to my child/children. I understand and acknowledge that the Director and/or the instructors of MBA/MBT may remove my child/children from class for not meeting and/or following the rules and regulations.

I (PARENT/GUARDIAN) agree to indemnify and hold harmless MBA/MBT, its ownership, servants, agents, employees, and officers, against all claims and actions which might result from personal injuries or damages, known or unknown, sustained by the aforementioned student due to participation in MBA/MBT classes and activities. In case of accident, injury, and/or serious illness, I request MBA/MBT staff to notify the Emergency Point of Contact (POC) listed on this form. If MBA/MBT staff are unable to reach the POC, I hereby authorize MBA/MBT staff to contact a medical physician and/or hospital to render medical services and/or treatment. It is understood and agreed that I will assume responsibility for all payments of any rendered medical services and/or treatment.

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| --- | --- |
| **Student Printed Name:** | **Student Signature:** |
| **Parent/Guardian Printed Name:** | **Parent/Guardian Signature:** |
| **Date:** | **Reviewed by (OFFICE USE ONLY):** |

1. I (PARENT/GUARDIAN) **CONSENT** to the use of my student’s name, portrait, picture, or photograph as part of MBA/MBT: advertising, marketing, promotional, and general distribution materials; website, social media (i.e., Facebook, Instagram, etc.), publications (i.e., CD-ROMs, DVDs, displays, pamphlets, and presentations). **Please Initial:\_\_\_\_\_**
2. I (PARENT/GUARDIAN) **DO NOT** consent to the use of my student’s name, portrait, picture, or photograph by MBA/MBT. **Please Initial:\_\_\_\_\_**

**OFFICE USE ONLY**

* **Professional Division: Y / N**
* **Current Ballet Level:\_\_\_\_\_\_\_**
* **Date Put on Pointe (If applicable): \_\_\_\_\_\_\_**