

# Ballet Theatre of Phoenix

## STUDENT REGISTRATION FORM

### Student Information:

Name of Student: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: M F

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Does your child have any medical condition(s) that his/her teacher should be aware of? Y N  
If yes, please explain: \_\_\_\_\_

Primary Email Address\*: \_\_\_\_\_

Secondary Email Address: \_\_\_\_\_

**\*Please print clearly - Ballet Theatre of Phoenix uses e-mail as a primary method of communication.**

Primary Cell Phone to receive Text Updates: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

Parent/Guardian's Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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### TUITION PAYMENT OPTIONS

WHEN ENROLLING YOUR STUDENT AT Ballet Theatre of Phoenix, YOU ARE COMMITTING THEM TO THE FULL SCHOOL YEAR. THERE ARE 3 PAYMENT OPTIONS.\*

1. Pay in Full – this includes the registration fee and is due upon receipt of registration.
2. Two Payments – The tuition will be divided equally into two payments. The first payment is due upon receipt of registration and will include the registration fee. The second on January first (1<sup>st</sup>). A credit/debit card is required to be on file if you select this payment option\*\*. If the card provided declines, a \$10.00 fee will be assessed and will be due along with the installment\*\*\*. If payment is not provided by the first class of the semester, a \$10.00 late fee will be assessed and will be due along with the installment. If the second payment is not provided by the first (1<sup>st</sup>) January, a \$10.00 late fee will be assessed and will be due along with the installment.
3. Monthly Installments\*\*\*\* - The tuition will be divided into monthly installments. August, December, and May will be prorated as half-months. The first payment is due upon receipt of registration and will include the registration fee. The following payments will be due on the first (1<sup>st</sup>) of each month. A credit/debit card is required to be on file if you select this payment option\*\*. If the card provided declines, a \$10.00 fee will be assessed and will be due along with the installment\*\*. If payment is not provided by the first (1<sup>st</sup>) of the month, a \$10.00 late fee will be assessed and will be due along with the installment.

\* Please read page 11 of the School Policies for Ballet Theatre of Phoenix's withdrawal policy.

\*\* *There will be a 3.5% processing fee for all credit/debit card transactions. If you would like to pay by cash or check, you must make this payment prior to the due date.*

\*\*\* *It is your responsibility to notify Ballet Theatre of Phoenix if your card number has changed.*

\*\*\*\* Monthly Tuition is based on an average 3-4 weeks per month. Because of certain holiday breaks, in some months a weekly class may only meet 3 times and other months will have 4. Should you sign up in the middle of the month, tuition will be pro-rated depending on how many weeks are left in the month.

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Please select your Tuition Payment Option Below:

In Full

Two Payments

Monthly Installments

Type of Card:    MC    VISA    AMEX    DISC

Card Number:

Expiration:

CVV:

\_\_\_\_\_ / \_\_\_\_\_

Name of Cardholder (print):

Billing Zip Code:

\_\_\_\_\_

Credit/Debit Card Authorization: I have read and agree to the above "Tuition Payment Options".

Signature: \_\_\_\_\_

I agree to receive prerecorded and automatically dialed phone calls and/or text messages from or on behalf of the school at the phone number provided above about all school-related matters, including about non-emergency situations and events. I understand that I may be charged for such calls or text messages depending on the terms of my cell phone service

Signature: \_\_\_\_\_

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For Office Use Only:

Tuition Amt.: \_\_\_\_\_ Reg. Fee: \_\_\_\_\_ Discounts: \_\_\_\_\_ Total: \_\_\_\_\_

Installment Fees: \_\_\_\_\_

PD \$ \_\_\_\_\_  CA  CK # \_\_\_\_\_  AMEX  VISA  MC  DSC

Rcvd by: \_\_\_\_\_ Date Rcvd: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Conf email sent: \_\_\_\_ Date email sent: \_\_\_\_\_ Attendance: \_\_\_\_ Email List: \_\_\_\_\_

# Ballet Theatre *of* P H O E N I X

I acknowledge that I have read and understand the expectations and policies for Ballet Theatre of Phoenix that have been outlined in the Welcome Packet, Tuition Schedule, and the Policies and Procedures documents available at <https://www.ballettheatreofphx.org/school-year/#forms>.

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Student Name

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Student Signature (for students Level 1 and up)

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Date

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Parent Name

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Parent Signature

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Date