

MOBILE BALLET SCHOOL

Student Registration 2011-2012

www.mobileballet.org
4351 Downtowner Loop N
Mobile, AL 36609
251-342-2241

New Student Returning Student

(Please Print)

Date of Registration _____

Child's Name (Last) _____ (First) _____		Age on Sept. 1, 2011 _____	Date of Birth _____	Gender <input type="checkbox"/> M <input type="checkbox"/> F	
Responsible Billing Party (Name) Billing address (if different from below)		Child lives with <input type="checkbox"/> both parents <input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> other (specify) _____			
Primary Parent/Guardian <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. (First Name) _____ (Last Name) _____		Secondary Parent/Guardian <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. (First Name) _____ (Last Name) _____			
Mailing Address		Mailing Address (if different from primary)			
City _____	State _____	Zip _____	City _____	State _____	Zip _____
Home Phone # _____	Cell # _____	Work # _____	Home Phone # _____	Cell # _____	Work # _____
E-Mail Address _____		E-Mail Address _____			
Employer Title/Position _____		Employer Title/Position _____			
Child's School (2011-2012) _____			Child's Grade (2011-2012) _____		

Check your child's ballet class level and jazz class level as assigned: <table> <tr> <td>Primary Division</td> <td>Junior Division</td> <td>Senior Division</td> </tr> <tr> <td><input type="checkbox"/> Primary 3</td> <td><input type="checkbox"/> Ballet 1</td> <td><input type="checkbox"/> Intermediate Ballet</td> </tr> <tr> <td><input type="checkbox"/> Primary 4</td> <td><input type="checkbox"/> Ballet 2</td> <td><input type="checkbox"/> Advanced Ballet</td> </tr> <tr> <td><input type="checkbox"/> Primary 5</td> <td><input type="checkbox"/> Ballet 3</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Ballet 4 <input type="checkbox"/> Jazz I</td> <td><input type="checkbox"/> Jazz III</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Ballet 5 <input type="checkbox"/> Jazz I</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Ballet 6 <input type="checkbox"/> Jazz I</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Ballet 7 <input type="checkbox"/> Jazz II</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Ballet 8 <input type="checkbox"/> Jazz II</td> <td></td> </tr> </table>			Primary Division	Junior Division	Senior Division	<input type="checkbox"/> Primary 3	<input type="checkbox"/> Ballet 1	<input type="checkbox"/> Intermediate Ballet	<input type="checkbox"/> Primary 4	<input type="checkbox"/> Ballet 2	<input type="checkbox"/> Advanced Ballet	<input type="checkbox"/> Primary 5	<input type="checkbox"/> Ballet 3			<input type="checkbox"/> Ballet 4 <input type="checkbox"/> Jazz I	<input type="checkbox"/> Jazz III		<input type="checkbox"/> Ballet 5 <input type="checkbox"/> Jazz I			<input type="checkbox"/> Ballet 6 <input type="checkbox"/> Jazz I			<input type="checkbox"/> Ballet 7 <input type="checkbox"/> Jazz II			<input type="checkbox"/> Ballet 8 <input type="checkbox"/> Jazz II		My child will attend: Please check all that apply: <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday _____ classes per week	Registration Fee: (Remit with completed form) <input type="checkbox"/> \$30 returning student (paid by 5/31) <input type="checkbox"/> \$45 returning student (paid after 6/1) <input type="checkbox"/> \$30 new student <input type="checkbox"/> \$20 per additional sibling Names of siblings enrolled: _____ _____ _____	Tuition Policy: Tuition payments are due by the 10 th of each month, September through May. <u>You will receive a statement only if your account is past due.</u> Mobile Ballet School must be notified in writing, one month in advance, of your intention to withdraw your student. <u>Tuition payments and Showcase fees must be current for your child to participate in Showcase.</u> Parent Initials _____
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	<input type="checkbox"/> Ballet 7 <input type="checkbox"/> Jazz II																															
	<input type="checkbox"/> Ballet 8 <input type="checkbox"/> Jazz II																															

Hold Harmless Agreement: Dancing is a strenuous physical activity and injuries, although not frequent, do occur. By enrolling your child in dance classes at Mobile Ballet, you assume the risk, if any, for any injuries your child may incur while engaged in dance classes, performances, public appearances or other related activities, including, but not limited to, necessary travel. By your signature below, you agree to HOLD HARMLESS Mobile Ballet, its officers, directors, agents, servants and employees from any liability or fault for any injuries your child may incur while engaged in dance classes, performances, public appearances and/or related activities, including, but not limited to, necessary travel.

Media Agreement: I understand that photographers, television crews, representatives of the media, and/or staff of the School will sometimes be present photographing, filming, or otherwise recording activity at the School and/or activities participated in by students at the School. I agree to permit the School and its designees to use the photographic likeness, video and television recordings, artistic, musical, and written work (the "Likeness and Work") of the Student for School purposes. I knowingly and voluntarily agree to hold harmless the School regarding the reproduction, publication, or other use of the Student's Likeness and Work, and further acknowledge and agree that by signing this Agreement, I waive any claim or cause of action I otherwise might have against the School regarding such usage or damages resulting therefrom.

Parent's Signature _____ Date _____

OFFICE USE ONLY		
Office _____	School _____	Bookkeeping _____