

# School of RICHMOND BALLET

## Registration Form 2010-2011

### **CONTACT INFORMATION:**

Student's Name: \_\_\_\_\_ Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ M / F  
Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
\_\_\_\_\_  
Home Phone: ( ) \_\_\_\_\_--\_\_\_\_\_  
Student Cell (if applicable): ( ) \_\_\_\_\_--\_\_\_\_\_  
Mother/Guardian Name: \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_--\_\_\_\_\_  
Cell Phone: ( ) \_\_\_\_\_--\_\_\_\_\_  
Email address: \_\_\_\_\_ Name of Employer: \_\_\_\_\_  
Father/Guardian Name: \_\_\_\_\_  
Work Phone: ( ) \_\_\_\_\_--\_\_\_\_\_  
Cell Phone: ( ) \_\_\_\_\_--\_\_\_\_\_  
Email address: \_\_\_\_\_ Name of Employer: \_\_\_\_\_  
Sibling Name(s) *if enrolled at the School of Richmond Ballet:*  
\_\_\_\_\_

### **REGISTRATION INFORMATION:**

Class Course #(s): \_\_\_\_\_  
2nd Choice\* Course #(s): \_\_\_\_\_  
*\*Please note: Registration is processed on a first-come-first-served basis, and classes fill quickly. We cannot guarantee class availability.*

### **PAYMENT INFORMATION: Please read financial information on attached form before completing**

Tuition amount: \$ \_\_\_\_\_ (full amount) Check #: \_\_\_\_\_  
2nd Student discount\*: \$ \_\_\_\_\_ (- 25%) Credit Card #: \_\_\_\_\_  
*\*If applicable, applied to lesser tuition amount\**  
Registration Fee: \$ \_\_\_\_\_ (new students) Security Code #: \_\_\_\_\_ (on back of card)  
*\$20.00 Children's / \$40.00 Lower, Middle, Upper*  
Processing Fee: \$ **20.00** (If payment not made in full) Visa MC Amex Disc Exp. Date: \_\_\_\_\_ / \_\_\_\_\_  
Total Fees Due \$ \_\_\_\_\_ Yes, Please charge my credit card on the 1<sup>st</sup> of every  
month that a quarterly payment is due.  
Amount Enclosed: \$ \_\_\_\_\_ \*\*Do not check above if you would like to receive a bill every quarter  
Remaining Balance: \$ \_\_\_\_\_  
To be paid in quarterly installments as listed in the Financial Information

**I have read the attached Financial Information highlighting registration, tuition, and payment information. I am aware of the stipulations that accompany the quarterly payment option, which Richmond Ballet provides as a courtesy, and I agree to pay all money due on the dates as listed in the Financial Information. I further understand that, except in the case of illness or injury, or family relocation, I am committed to pay the full year's tuition.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_

*\*Please complete the Registration Form AND Release of Claims Form on reverse side before returning\**  
**Registration form and 1st payment must be received to be enrolled in any class.**

To register, please mail/fax form with check or credit card information:  
407 East Canal St. Richmond, VA 23219 Fax: (804) 344-0902

**Release of Claims and Authorization**

2010-2011 SCHOOL SESSION

A new form must be completed and on file for each new school session.

Release/authorization made on this date, \_\_\_\_\_, 2010-2011 by (parent or guardian) \_\_\_\_\_  
for (student) \_\_\_\_\_.

I am aware that ballet dancing and the physical movement associated with it places stress on the body and carries with it the risk of physical injury. On behalf of my child and myself (and if I am no longer a minor, on my behalf), I assume the risk and agree that the School of Richmond Ballet shall not be liable in any way for injuries sustained during attendance at the School of Richmond Ballet, its successors and its assignees for all personal injuries caused by, or arising from, the above described activities or any activities related thereto.

I understand that, in order for all children enrolled in class to receive the best dance education experience possible, the School of Richmond Ballet reserves the right to re-assess placement of any child who is not ready to participate productively and safely.

Further, I grant the School of Richmond Ballet, its agents and employees permission to authorize any emergency medical treatment that may be required for my child or ward during the 2010-2011 school session. My medical insurance carrier is:

| Insurance Company | Policy Number/Group Number | Cover Dates |
|-------------------|----------------------------|-------------|
|-------------------|----------------------------|-------------|

I, the undersigned, have read this release/authorization and understand all of its terms. I execute it voluntarily and with knowledge of its significance. I have executed this release/authorization on the day and year stated above.

\_\_\_\_\_  
Signature of Student (if 18 years of age or older) Date

\_\_\_\_\_  
Signature of Parent or Guardian (if student is under 18 years of age) Date

**MEDICAL INFORMATION:**

Is the student allergic to anything (medication or other)? If YES, please list: NO YES \_\_\_\_\_

Does the student take any medication on a regular basis? If YES, please list: NO YES \_\_\_\_\_

Are there any medical conditions we should be aware of? If YES, please list: NO YES \_\_\_\_\_

Primary Care Physician's Name \_\_\_\_\_ Phone # \_\_\_\_\_

**EMERGENCY CONTACTS: If you would like to provide a contact other than the student's parent/guardian, please do so below**

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Relation \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Relation \_\_\_\_\_

**PHOTOGRAPH/ LIKENESS RELEASE:**

I, \_\_\_\_\_, the parent/guardian (or student, if 18+) authorize the School of Richmond Ballet and/or its representative, agent, or employee to use any photograph/likeness of my child (or myself), \_\_\_\_\_,

for any purpose, including publicity, choreographic archives, promotional materials and/or any other reason deemed appropriate by the artistic staff or marketing director.

\_\_\_\_\_  
Parent/Guardian (or student if 18+) signature Date

## Financial Information

*\*Please read this form thoroughly and keep for you records*

### Annual Registration:

1. There is a non-refundable fee for each NEW student entering the school: \$20.00 for Children's Division, \$40.00 for Lower Division. Returning students within two school years are not required to pay a registration fee.
2. Registration must be completed prior to any student's entrance into class.

### Tuition Payment:

1. **Upon registration all students and their parents/legal guardians make the commitment to pay the agreed upon full year's tuition whether they remain enrolled in the program or not. Tuition is non-refundable except in the case of a serious illness or injury documented by a doctor's explanation, or family relocation (please see Withdrawal Policy below).**
2. School of Richmond Ballet tuition is set at affordable, competitive rates. If the student is registering for one semester (Children's Division only) the tuition is to be paid in full for that semester at the time of registration (refer to "Semester Tuition" rates on SRB class schedule). Students enrolled for the full year can pay their tuition in full at the time of registration, or in four installments. The first installment is due at the time of registration. Those who choose to pay in installments will receive bills for subsequent payments, unless a request is made for automatic billing by credit card as listed on the registration form. There is a \$20.00 annual processing fee due with the first payment, PER STUDENT, for the quarterly payment option, which will automatically be applied to your account. **Selecting the quarterly payment, option does not lessen the legal commitment to pay the full year's tuition.** The quarterly payment schedule is as follows:

**1<sup>st</sup> Payment – Due at time of registration**

**2<sup>nd</sup> Payment – Due November 1, 2010**

**3<sup>rd</sup> Payment – Due February 1, 2011**

**4<sup>th</sup> Payment – Due April 1, 2011**

### Late Fee(s) and Delinquent Accounts:

A \$20.00 late fee will be charged each month for as long as you are delinquent in your payments. When you bring the payments up to date, we will stop charging a late fee. Students with accounts 30 days in arrears may NOT continue to attend classes in the School of Richmond Ballet. In cases where students default on financial obligations, the primary billing contact is liable for the outstanding balance and any collection costs and/or legal fees incurred by the School of Richmond Ballet during the process. When using the automatic payment option, it is the responsibility of the payee to notify the School of Richmond Ballet of changes to the credit card on file. If financial difficulties arise, please call Kim Chiarchiaro, SRB Business Manager, at (804) 344-0906.

### Withdrawal Policy: WRITTEN NOTICE OF INTENT TO WITHDRAW MUST ACCOMPANY ALL WITHDRAWALS.

**Lower, Middle, and Upper Division:** A \$50.00 withdrawal fee will be charged for all withdrawals before October 4<sup>th</sup>, 2010, and the student will be exempt from finishing payment for the 2010-2011 school year. A refund of the students' current balance less the time enrolled in class and the \$50.00 withdrawal fee will be issued. **Any student withdrawing after October 4<sup>th</sup>, 2010 will be held responsible for the full tuition amount for the 2010-2011 school year, even if paying the quarterly amount.**

**Children's Division:** Students in the Children's Division will be held responsible for payment for all classes prior to the time of written notification of withdrawal, and will be charged a \$25.00 withdrawal fee.

In the case of illness or injury (as documented by an attending physician) or family relocation, a refund will be issued for any amount paid for classes not taken by the student.

**All withdrawals are effective as of the date on which the Administration Office is notified;** informing your child's teacher is NOT considered a formal notification of withdrawal. A formal notification in writing must be submitted to Kim Chiarchiaro, SRB Business Manager. In cases when notification is received after a student stops attending class, the billing contact will still be held liable for tuition due for classes between the last attended class and the effective date of withdrawal.

### Financial Assistance:

Limited Financial Assistance is available to students enrolled in the Middle and Upper Levels. To qualify, students must demonstrate financial need, a high level of commitment, and significant talent as evaluated by the program's director and teachers. Students wishing to apply for assistance must complete a Financial Aid Application along with supporting documentation, and turn it in with their registration form and initial minimum required payment (1<sup>st</sup> quarter) no later than September 1<sup>st</sup>. If aid is granted, any overpayment will be refunded. Your Financial Aid Applications can be requested from Sarah Ferguson, Education Administrator at 804-344-0906 x 239

**By signing the registration form, I acknowledge that I have read the above financial information highlighting registration, tuition, and payment information. I am aware of the stipulations that accompany the quarterly payment option, which Richmond Ballet provides as a courtesy, and I agree to pay all money due on the dates as listed above. I further understand that if any account becomes 30 days overdue, the account may be turned over to a collection agency and that, except in the case of illness or injury, or family relocation, I am committed to pay the full year's tuition.**