

**School Registration**

As the Parent/Guardian of (“Student”), I have read, understand, agreed and executed this enrollment contract for the purpose of enrolling at the “academy” of Las Vegas Ballet Company for the 2022-2023 School year.

**Payment Policies**

1. Tuition is non-refundable and non-transferable.
2. **Tuition is due by the first of each month.** If accounts are not paid by the 5th of the month, there will be a 10% of the tuition late fee applied to the account balance. There is a $30.00 returned check charge for any checks returned by the bank.
3. **Tuition payments must be made on time.** Students will be denied access to class if the account is not paid in full by the due date.
4. Bills will NOT be sent in the mail.
5. A $30.00 fee will be charged for every returned check.
6. Registration fee $40.

**Make-up class Policies**

1. Students and Parent/Guardian must call and pre-arrange a make-up class.
2. Students must make-up missed classes within the same calendar month.
3. Missed classes not make-up will be lost classes.
4. Missed classes do not accrue from one month to another month.
5. Students must check in and let the instructor of the class know they are attending a make-up class.

**Liability Policy**

1. Dance and Participation in the academy can be physically demanding and can result in personal injury.
2. The Academy of Las Vegas Ballet Company is not responsible for any personal injury sustained by student in school or the building premises or as the result of the student’s participation in class, rehearsal, or performance. Any injuries or illness shall be promptly reported in writing to Academy Principal and /or office.
3. The Academy of Las Vegas Ballet Company is not responsible for loss or theft of any personal property on its premises. Any valuables should be left at home.
4. Students and Parent/Guardian understand that the nature of dance instruction is such that it may require the instructor to have physical contact with the student as in correcting body positioning, and hereby give their consent to such contact only as it pertains to the teaching of dance.

**Termination: PLEASE READ INITIAL THE FOLLOWING**

\* I understand this enrollment contract may be terminated by or on behalf of student, with written notice, and will take effect at the end of a month in which classes have been taken. X .

\* I hereby grant permission to Las Vegas Ballet Company and Kwak Ballet Academy to photograph and or videotape the student for educational or promotional uses for the school. X .

\* I understand that I am obligated and will be held fully responsible for the full tuition amount for the student under the payment term I have selected. X .

**I have read, understand and will comply with the above.**

**Print Parent/Guardian full name:**

**Parent/Guardian Signature: Date:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **STUDENT INFORMATION** | | | | | |
| Student’s Last Name First Middle | | | | | Date of Birth Age |
| Male Female |
| Insurance Company and Doctor’s name Medical conditions | | | | | |
| Emergency Contact (Name and number of person other than parent) | | | | | |
| **PARENT/GUARDIAN INFORMATION** | | | | | |
| Mother’s Last name First | | | Father’s Last name First | | |
| Address city State Zip | | | | | |
| Home Phone | | Cell Phone | | | |
| E-mail | | | | | |
| **REGISTRATION FEE AND 1ST MONTH TUITION PAYMENT IS DUE UPON REGISTRATION, PRIOR TO TAKIING CLASSES**  Tuition payments must be made on time. Students will be denied access to class if the account is not paid in full by the due date. | | | | | |
| **Tuition Rate class Day/Time** | | | | | |
| **Registration fee**  $40 | | | | | |
| Payment type CS / CR / CH | | **Total** | | | |
| **Auto payment by Credit Card** Name ofcard holder card number | | | | | |
| Expiration date | Security code | | | Zip code | |